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## ABSTRACT

This report describes the application requirements that state agencies need to follow in order to obtain federal funding for family support and preservation (FSP) programs, as budgeted under Title IV-B of the Social Security Act for fiscal years (FYs) 1994 through 1998. Part I of the report serves as an introduction and provides background information on FSP services. Part II discusses FSP services and the guiding principles for these services. Part III discusses planning activities essential to the development of a 5-year state plan for services beginning in FY 1995, including consultation, coordination, data collection, and joint planning. Part IV contains a brief outline of major provisions of the statute and additional fiscal and administrative information. Part V contains instructions for preparing the FY 1994 application for planning funds and for services funds. The bulk of the report consists of attachments that provide: (1) a list of estimated state allotments through FY 1998; (2) a copy of the statute; (3) an extensive list of family preservation resources and programs, including descriptions of current state programs; (4) application forms; (5) guidelines on 5-year state plans; and (6) a list of Administration for Children and Families regional offices. Contains 133 references. (MDM)

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**ACF**

**Administration  
for Children  
and Families**

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Administration on Children, Youth and Families**

**1. Log No. ACYF-PI-94-01**

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**3. Originating Office: Children's Bureau**

**4. Key Word: Family Preservation and Support Services**

**PROGRAM INSTRUCTION**

**TO:** State Agencies Administering the Title IV-B  
Child and Family Services Program.

**SUBJECT:** Implementation of New Legislation: Family  
Preservation and Support Services,  
Title IV-B, Subpart 2.

**PURPOSE:** The purpose of this Program Instruction is to  
provide information on the Fiscal Year (FY)  
1994 application requirements and guidance  
for developing the FY 1995 five-year State  
Plan for Family Preservation and Support  
Services. A separate Program Instruction  
will be issued for grants to Indian Tribes.

**LEGAL AND RELATED**

**REFERENCES:**

Title IV-B of the Social Security Act,  
Subpart 2, Family Preservation and Support  
Services; Omnibus Budget Reconciliation Act  
of 1993 (P.L. 103-66); 45 CFR Part 92.

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## OVERVIEW:

This new legislation aims to promote family strength and stability, enhance parental functioning, and protect children through funding a capped entitlement to States to provide family support and family preservation services, which the law defines broadly.

There is widespread consensus in the child and family policy community that these new dollars, although relatively small, can best be used strategically and creatively to stimulate and encourage broader system reform which is already under way in many States and communities.

The FY 1994 appropriation for this program is \$60 million. Of this amount, \$2 million is reserved for Federal evaluation, research, and training and technical assistance; \$600,000 is reserved for grants to Indian Tribes. The balance is available for grants to States to fund planning and services for family support and family preservation.

For FY 1995, the authorization increases to \$150 million. Of this amount, \$6 million is reserved for Federal evaluation, research, and training and technical assistance; \$1.5 million is reserved for grants to Indian Tribes. A new program of grants to State courts will be initiated at a funding level of \$5 million. (Information on this program will be forthcoming.) The balance is available for grants to States for services.

Attachment A lists FY 1994 State allotments and estimated allotments for FYs 1995-98 based on the statutory formula. Attachment B contains a copy of the statute and an excerpt from the Conference Report regarding the definition of family support services.

This Program Instruction is divided into five parts.

- Part I is an introductory section which contains our vision for this new legislation and background information on family support and family preservation services.

- Part II is a discussion of family support and family preservation services and guiding principles for these services.
- Part III is a discussion of planning activities essential to the development of a five-year State Plan for services beginning in FY 1995, including consultation, coordination, data collection, and joint planning.
- Part IV contains a brief outline of major provisions of the statute and additional fiscal and administrative information.
- Part V contains instructions for preparing the FY 1994 application for planning funds and for services funds.

SUBMITTALS:

The FY 1994 Application

We encourage States to submit the FY 1994 application to the appropriate Regional Office as soon as possible and no later than June 30, 1994.

The FY 1995 State Plan

We encourage States to submit the five-year FY 1995-99 State Plan as soon as possible after completing the planning process and no later than June 30, 1995.

## PART I: INTRODUCTION

### A. Background

Enactment of a new Subpart 2 to title IV-B of the Social Security Act is the first major change in this title since the amendments made by Public Law 96-272, the Adoption Assistance and Child Welfare Act of 1980.

The goals of that legislation were to:

- prevent the unnecessary separation of children from their families;
- improve the quality of care and services to children and their families; and
- ensure permanency for children through reunification with parents, through adoption, or through another permanent living arrangement.

These goals have not been fully realized. A wide variety of reasons have been suggested by researchers and practitioners, including:

- social, cultural, and economic changes (increases in substance abuse, community violence, poverty, and homelessness, for example), which have affected the number of families coming to the attention of child welfare agencies and the severity of their problems;
- rising rates of child abuse and neglect reports, particularly for child sexual abuse;
- a child welfare system unable to keep up with these increased demands, given constrained resources, high caseloads, and overburdened workers;
- services planning that focuses most resources on crisis intervention and too few on prevention;
- lack of services that fit the real needs of families; and
- the isolation of the child welfare services system from other services needed by vulnerable families, such as housing, employment, and substance abuse services.

In response, Congress has passed, and the President has signed, legislation that will provide States with new Federal dollars for preventive services (family support services) and services to families at risk or in crisis (family preservation services).

In addition to providing funds for expanding services, the new program offers States an extraordinary opportunity to assess and make changes in State and local service delivery in child welfare, broadly defined. The purpose of these changes is to achieve improved well-being for vulnerable children and their families, particularly those experiencing or at risk for abuse and neglect. Because the multiple needs of these vulnerable children and families cannot be addressed adequately through categorical programs and fragmented service delivery systems, we encourage States to use the new program as a catalyst for establishing a continuum of coordinated and integrated, culturally relevant, family-focused services for children and families.

Among the elements that would ideally be part of the continuum, depending on family needs, are family support and family preservation services; child welfare services, including child abuse and neglect preventive and treatment services and foster care; services to support reunification, adoption, kinship care, independent living, or other permanent living arrangements; and linkages to services that meet other needs, such as housing, employment, and health.

In passing this legislation, Congress recognized that new funding alone would not be sufficient to meet the goals of the legislation and Public Law 96-272. Because new or expanded services are just one element needed to improve the child welfare system, many States and communities may choose to carry out major changes in the ways services are delivered and in the systems that deliver them, in order to ensure that services are part of a comprehensive, coordinated service delivery system that draws heavily on community-based programs in its design and implementation.

Therefore, we expect that a major goal of the planning process will be to examine the changes that are needed in each State to make delivery of services more responsive to the needs of individuals and communities and more sensitive to the context in which they are to be delivered.

It is our strong expectation that States will take advantage of this opportunity to move the child welfare service system in these directions, leading to a more coordinated, flexible system, built on and linked to existing community services and supports, and able to serve children and their families in a more effective way.

## B. Development of Family Preservation and Support Services

Family support and family preservation services are not new. They date back to the turn of the century, e.g., Hull House and the settlement house movement. Recently, however, there has been increased interest in such programs.

Over the last several years, State and local governments, foundations, national organizations, and non-profit agencies have begun to develop and implement family support and family preservation programs; push for change in child welfare programs, including reform of State laws and policies to support "family-centered practice;" and experiment with changing the way child welfare services are organized and delivered, including strengthening linkages with other agencies and resources and moving toward greater community direction and control of services.

A few examples of such efforts include the American Public Welfare Association's policy on Commitment to Change, the "decategorization of funding" and collaborative planning efforts in a number of States, the Children's Trust Funds and Children's Cabinets, the Pew Foundation's Children's Initiative and support for demonstrations of improved planning and child welfare service delivery from the Edna McConnell Clark Foundation and the Annie E. Casey Foundation. Specific program models include the Homebuilders and the Families First programs, the Healthy Families America initiative, and hundreds of community-based family support programs nationwide including both family resource centers and home-based models, such as Parents as Teachers, and the Home Instruction Program for Preschool Youngsters (HIPPY).

Several Federal programs or initiatives also have focused on prevention, family-centered practice, and a community-based approach. Some examples include the Head Start Bureau's Family Service and Family Support Projects, and Parent and Child Centers; the national Comprehensive Child Development Program demonstration; the National Center on Child Abuse and Neglect's State community-based prevention grants associated with Children's Trust Funds; the Family Support Resource Center and the Family Based Services Resource Center funded by the Children's Bureau; the Family and Youth Services Bureau's Family Resource and Support program; the Public Health Services' (PHS) "Healthy Start" program; the Office of Community Services' Family Support Centers (homeless families demonstration); the Department of Housing and Urban Development's (HUD) Family Self-Sufficiency demonstration program; and the PHS Child and Adolescent Services System Program (CASSP), a planning model for coordinated mental health services now implemented in all States.

We have compiled in Attachment C reference information on family support and family preservation resources, programs and options;



information on collaborative planning and needs assessment; and a summary of two recent Federal programs that States and communities should consider as they develop the family support and family preservation five-year plan: the community empowerment funds under the social services block grant and the HUD Family Unification Program.

As one part of our implementation of this new legislation, we have convened a series of focus groups in both the Central and Regional Offices with family support and family preservation program directors, practitioners, and experts; State, county, and city child welfare administrators; State and local agencies with experience in providing such programs; representatives of Indian Tribes and regional and national Tribal organizations; national advocacy, interest group, and professional organizations; representatives of national organizations representing Governors, State legislators, and counties; and parents, foster parents, and consumers of child welfare services. In addition, we have met with or received written materials and recommendations from a number of other experts and practitioners in the field. The suggestions, guidance, and information we have received through this process have been invaluable to us in the development of this Program Instruction.

Further, in an effort to improve Federal collaboration and coordination, we have met with staff of other Federal programs (both within and outside the Department) to obtain current information on new programs and explore ways to consolidate and maximize resources.

We are actively collaborating on FY 1994 discretionary grant announcements with the Health Resources and Services Administration (HRSA) and the Substance Abuse and Mental Health Administration (SAMHSA) in the Public Health Service. For example, in an effort to strengthen coordination at the State and local level, HRSA's discretionary grant announcement for a new program, "Home Visiting for At-Risk Families," will require that the application must be developed collaboratively by representatives of the State agency administering title IV-B (Child and Family Services) and title V (Maternal and Child Health). Information on the Home Visiting Announcement may be obtained by calling Geraldine J. Norris at 301-443-6600.

Also, in the interest of coordinating service efforts at the State and local level, we have been working with SAMHSA which will be publishing a discretionary grant announcement early in FY 1994. The announcement will be for the development of community-based systems of care for children and adolescents who are experiencing a serious emotional disturbance and their families.

In reviewing applications for these discretionary grants, one of



the criteria that the Center for Mental Health Services, SAMHSA, will take into account is the degree to which the applicant has included children's mental health services in its comprehensive planning for coordinated services under the Family Preservation and Support Services program.

## PART II: FAMILY PRESERVATION AND FAMILY SUPPORT SERVICES AND PRINCIPLES

The literature on professional practice and the discussion at the focus groups reflected general agreement on the goals for family support and family preservation services. These services should be directed towards:

- enhancing parents' ability to create stable and nurturing home environments that promote healthy child development;
- assisting children and families to resolve crises, connect with necessary and appropriate services, and remain safely together in their homes; and
- avoiding unnecessary out-of-home placement of children, and helping children already in out-of-home care to be returned to and be maintained with their families or in another planned, permanent living arrangement.

"Family support services" are primarily community-based preventive activities designed to alleviate stress and promote parental competencies and behaviors that will increase the ability of families to successfully nurture their children; enable families to use other resources and opportunities available in the community; and create supportive networks to enhance child-rearing abilities of parents and help compensate for the increased social isolation and vulnerability of families.

Examples of community-based services and activities include respite care for parents and other caregivers; early developmental screening of children to assess the needs of these children and assistance in obtaining specific services to meet their needs; mentoring, tutoring, and health education for youth; and a range of center-based activities (informal interactions in drop-in centers, parent support groups) and home visiting activities. (See Section 431 of the statute and the Conference Report language in Attachment B.)

"Family preservation services" typically are services designed to help families alleviate crises that might lead to out of home placement of children; maintain the safety of children in their own homes; support families preparing to reunify or adopt; and assist families in obtaining services and other supports necessary to address their multiple needs in a culturally sensitive manner. (If a child cannot be protected from harm without placement or the family does not have adequate strengths on which to build, family preservation services are not appropriate).

Examples of family preservation activities and services, include

intensive preplacement preventive services; respite care for parents and other caregivers (including foster parents); services to improve parenting skills and support child development; follow-up services to support adopting and reunifying families; services for youth and families at risk or in crisis; and intervention and advocacy services for victims of domestic violence. (Section 431 of the statute.)

Currently, a number of program models, approaches, and levels of family preservation services are in operation. In this Program Instruction the term "family preservation" is used to include all such service options. ACF does not plan to require and does not endorse any specific program model for implementation. However, in joint planning activities with Federal staff, States will have an opportunity to discuss the basis for their selection of program models, the operation of specific service designs and options, and sources for additional information on high quality program approaches and models. Some activities such as respite care, home visiting, and assistance in obtaining services may be considered either a family support or a family preservation service.

### Families and Children

The statute clarifies that, in providing services, "families" may include biological, adoptive, foster, and extended families. The term "children" includes youth and adolescents.

### Statewideness

We recommend that States consider: (1) targeting services in areas of greatest need; and (2) targeting services to support cross-cutting community-based strategies. Such strategies have the potential to draw on multiple funding streams to bring a critical mass of resources to bear in high-need communities.

There is no requirement that services must be statewide by a specific date, although States are encouraged to move in that direction as they set goals in their State Plans.

### Guiding Principles

Both family support and family preservation services are based on a common set of principles or characteristics which help assure their responsiveness and effectiveness for children and their families. Focus group participants frequently pointed out that, while various models of services or programs are available for communities and States to consider, it is an approach based on these principles that should provide an organizing framework for State planning.

Among the shared principles most often identified by practitioners are:

- The welfare and safety of children and of all family members must be maintained while strengthening and preserving the family whenever possible. Supporting families is seen as the best way of promoting children's healthy development.
- Services are focused on the family as a whole; family strengths are identified, enhanced, and respected, as opposed to a focus on family deficits or dysfunctions; and service providers work with families as partners in identifying and meeting individual and family needs.
- Services are easily accessible (often delivered in the home or in community-based settings, convenient to parents' schedules), and are delivered in a manner that respects cultural and community differences.
- Services are flexible and responsive to real family needs. Linkage to a wide variety of supports and services outside the child welfare system (e.g., housing, substance abuse treatment, mental health, health, job training, child care) are generally crucial to meeting families' and children's needs.
- Services are community-based and involve community organizations and residents (including parents) in their design and delivery.
- Services are intensive enough to meet family needs and keep children safe. The level of intensity needed to achieve these goals may vary greatly between preventive (family support) and crisis services.

For additional information on service programs and options, see Attachment C.

### PART III: PLANNING ACTIVITIES

This new legislation provides an unusual opportunity for States to strengthen and refocus their child and family services. The legislation:

- provides additional and flexible funds for innovative services;
- directs the focus of these services in new ways; and
- provides the resources for a planning effort to ensure maximum results.

Because the new focus on family-based services and community linkages requires changes in vision, in philosophy, and in the design and delivery of child welfare services, the planning period is especially critical. By making funds available for planning and by requiring the development of a long-range, five-year plan, the legislation recognizes this critical first step and offers each State an opportunity to strengthen, reform, and better coordinate and integrate its service delivery system.

We strongly urge States to take advantage of this extraordinary opportunity. To seize that opportunity, we believe that a thoughtful, strategic planning process that includes a wide array of State, local, and community agencies and institutions, parents, consumers, and other interested individuals whose collective work feeds into joint State-Federal planning activities, is necessary.

The five-year State Plan will be the vehicle to articulate a State's vision and strategy for achieving that vision, set goals and measure progress towards those goals, and identify practical next steps toward a more comprehensive and integrated continuum of services that responds to the needs of vulnerable families within the State. To provide the maximum opportunity for States to strategize broadly about the service continuum and family needs, State Plans need to include the major programs serving children and their families, including child welfare services broadly defined, and need to consider family support and family preservation services not as isolated categorical programs but as a part of the overall continuum. Ideally, the planning process will offer an opportunity for multiple State, local and community agencies and organizations (as well as Federal agencies) to become partners on behalf of children.

State planning and service development activities should be characterized by broad consultation and involvement, the identification and gathering of data needed for planning (needs assessment), and joint planning between Federal and State agency staff leading to the development of the State Plan.

## A. Consultation and Coordination

We recognize that many States have successful, cross-cutting planning processes underway for child and family services. We believe that these new title IV-B funds can be used to build on and strengthen current planning efforts and act as a catalyst for States at the beginning of this planning process.

In isolation, family support and family preservation services cannot effectively address the needs of children and families. Therefore, consultation and coordination should include the active involvement of major actors across the entire spectrum of the service delivery system for children and their families including:

- State and local public agencies, non-profit private agencies, and community-based organizations with experience in administering programs of services for children and families (including family support and family preservation);
- Representatives of communities, Indian Tribes, and other areas where needs for family support and family preservation are high.
- Parents (especially parents who are participating in or who have participated in family support and/or family preservation programs) and other consumers, foster parents, adoptive parents, and families with a member with a disability.
- Representatives of professional and advocacy organizations (including foundations and national resource centers with the expertise to assist States and communities with regard to family support and family preservation), individual practitioners working with children and families, and the courts; and
- State and local agencies administering Federal and federally assisted programs, such as maternal and child health; the Early and Periodic, Screening, Diagnosis, and Treatment program; mental health; child abuse and neglect (e.g., the NCCAN emergency child abuse prevention services grants); transitional and independent living; substance abuse; education; developmental disabilities; juvenile justice; early childhood education (child care and Head Start); domestic violence; youth gangs; housing; income security (AFDC, JOBS, Child Support); nutrition (Food Stamps, WIC); the social services and the community services block grant; and the title IV-A Emergency Assistance program.

There are many purposes of outreach and consultation, including the development of new and more effective service approaches for



children and families, the assessment of family and community needs, the identification of service overlaps and gaps, the identification of available resources (expertise, money, facilities, staff) that might help to meet needs, and the development of strategies for blended financing, common application forms, or simplified case management procedures across programs. All of these outcomes help to improve service delivery to children and families.

#### B. Collection of data

An essential component of the planning process is the collection of information on which to base service decisions and determine future goals. We strongly recommend that States conduct a thorough needs assessment using available data whenever possible.

The needs assessment should identify the existing array of family support, family preservation, and other related services currently being provided; resources and sources of funding; and gaps and deficiencies in services. It should also identify data on which to base target population decisions, e.g., demographic characteristics of children and families from census data; State legislative and city planning data; child abuse and neglect and infant mortality data; data on communities that experience high rates of foster care placements; and data about communities experiencing disproportionately high levels of poverty, homelessness, substance abuse, or teen pregnancy. A State might also project what the future circumstances of families and children in the State would be if nothing was done.

#### C. Joint planning

Joint planning is an ongoing process of discussion, consultation, and negotiation which takes place between the State child welfare agency and the Federal Regional Office representative for the purpose of developing a State Plan. It includes Federal technical assistance to the State as well.

Through joint planning, State and Federal staff, with appropriate consultation and participation of other State, local and community-based stakeholders, discuss the key strategic decisions facing the State (as identified from needs assessments, consultation, and data available to the State):

- priorities for services and for target populations;
- proposed goals and objectives;
- unmet needs, services gaps, and overlaps in funding;
- other funding resources available to provide the services needed;
- the State and local organizations, foundations, and agencies with which the child welfare agency can coordinate;
- ongoing plans to move toward the State's goals by improving

- the service delivery system and ensuring a more efficient comprehensive system of care for children and families; and methods for reviewing progress toward those goals.

Finally, joint planning also includes Federal guidance and technical assistance after the State Plan has been developed and approved. This is provided through follow-up review and discussion of progress in accomplishing the goals identified in the plan and updating the plan as appropriate.

## PART IV: STATUTORY AND FISCAL REQUIREMENTS

### A. Brief Outline of Major Provisions of the Statute

#### 1. Purpose

Family Preservation and Support Services is a capped entitlement program. Its purpose is to encourage and enable each State "to develop and establish, or expand, and to operate a program of family preservation services and community-based family support services." One hundred percent Federal funding is available in FY 1994 to develop and submit a five-year State Plan for such services in FY 1995. (Section 430) A copy of the statute is found in Attachment B.

#### 2. Five-Year State Plan

In order to receive funds in FY 1995, each State must submit a five-year State Plan for FYs 1995-99. The plan must at minimum:

- set forth the goals to be accomplished by the end of the fifth year;
- be updated periodically to set forth the goals to be accomplished by the end of each fifth fiscal year thereafter;
- describe the methods to be used to measure progress toward the goals; and
- provide for coordination of services under the plan with other Federal or federally assisted programs serving the same populations.

As part of an ongoing planning process, the State must:

- annually review progress toward accomplishing the goals;
- based on the annual review, revise the goals if necessary; and
- at the end of the fifth year, conduct a final review and provide a report to the Secretary and to the public on progress toward accomplishing the goals; and
- also at the end of the fifth year, amend the plan to set forth the goals for the next five years as developed in consultation with public and non-profit agencies. (Section 432 (a))

### 3. Joint Planning and Consultation Requirements

The Secretary will approve a plan that meets the requirements only if the plan was developed:

- jointly by the staff of the Department and the State (Section 432(b)(1)); and
- after consultation by the State agency with appropriate public and non-profit private agencies and community-based organizations with experience in administering programs of services for children and families, including family support and family preservation services. (Section 432(b))

### 4. Public Information and Reporting Activities

Annually, the State must furnish to the Secretary, and make available to the public, a report which contains a description of:

- the family preservation services and the community-based family support services to be made available under the plan in the upcoming fiscal year;
- the populations each program will serve; and
- the geographic areas in the State where each service will be available.

This first descriptive services report for FY 1995 and FY 1996 is due at the time the State submits its FY 1995 plan, and subsequent reports will be due by June 30 of each succeeding fiscal year for the upcoming fiscal year. (Section 432(a)(5))

As noted above, at the end of each five-year plan period, the State must report to the Secretary and to the public on its progress in meeting its five-year goals and on its goals for the next five-year period.

### 5. FY 1994 Application and Special Rule Requirements

- The State must submit an application for funds for FY 1994.
- Up to \$1 million of a State's allotment may be used for planning purposes to develop and submit the FY 1995-99 plan.
- Funds used for planning purposes in FY 1994 are 100 percent Federal funds, i.e., no State match is required.
- Funds not needed to develop the FY 1995-99 plan may be used to provide family support and family preservation services; funds over \$1 million in a State's allotment may only be

used for such services.

#### 6. Fiscal and Administrative Requirements

- Funds used to provide services in FY 1994 and subsequent years are federally reimbursed at 75 percent. Federal funding for planning and services will not exceed the amount of the State's allotment.
- States using funds for services in FY 1994 and subsequent years may not use more than 10 percent of total Federal and State service expenditures under this program for administrative costs.
- The ten percent limitation on administrative costs does not apply to funds used for planning purposes in FY 1994.
- States must spend a "significant portion" of service dollars for family support and for family preservation services, respectively. (Section 432 (a)(4))
- The use of other Federal funds as the State's share of expenditures is prohibited. (Section 434)

#### 7. Other Requirements

The statute requires that the State will:

- provide for the proper and efficient operation of the State Plan (Section 432(a)(6));
- assure, and provide fiscal reports to the Secretary to demonstrate compliance with the requirement, that Federal funds under this program will not be used to supplant Federal or non-Federal funds for existing family support and family preservation services and activities (Section 432 (a)(7));
- furnish other reports as required (Section 432(a)(8));
- participate in evaluations as required (Section 432(a)(8)); and
- expend funds by September 30 of the fiscal year following the fiscal year in which the funds were awarded, i.e., the State must liquidate all obligations of FY 1994 funds by September 30, 1995. (Section 434(b)(2))

#### 8. Definitions

Definitions, including definitions of services, are found in

Section 431 of the Social Security Act. The Conference Report language provides additional examples of family support services (see Attachment B).

## B. Additional Fiscal and Administrative Information

### 1. Rate of Federal Match

This FFP rate is the same as the rate under Subpart 1 of title IV-B. The State's contribution may be in cash or donated funds.

For example, a State with an allotment of \$600,000 must spend at least \$800,000 (at least \$200,000 of which is non-Federal) in order to receive the full amount of the allotment. If the State spends less than \$800,000 (e.g., \$700,000), it will receive 75 percent of the amount it spends (e.g., for \$700,000 in expenditures, the State will receive \$525,000).

### 2. Submittals

- The FY 1994 Application

The application for FY 1994 funds may be submitted as a preprint or in the format of the State's choice. A recommended preprint is found at Attachment D. If a State uses its own format, the application must include all the information specified in the preprint.

We encourage States to submit the FY 1994 application to the appropriate Regional Office as soon as possible after completing the application requirements and no later than June 30, 1994. Grant awards will be made after the application has been approved. (See Attachment F for a list of Regional Offices.)

- The FY 1995 State Plan

FY 1995 funds are available only after the State has submitted, and ACF has approved, a five-year State Plan for services that meets all requirements.

ACF is considering consolidating the five-year State Plan for Family Preservation and Support Services with the State's title IV-B (Subpart 1, Child Welfare Services) State Plan, and the title IV-E Independent Living Program plan. Instructions for submittal of this proposed consolidated FY 1995 five-year State Plan will be issued in the future to coincide with regulations ACF expects to propose for family support and family preservation services.



States are encouraged to submit the FY 1995 State Plan as soon as possible after completing the planning process and no later than June 30, 1995. Grant awards will be made after the plan has been approved.

### 3. Other Information

- FY 1994 funds are available for expenditures from the beginning of the fiscal year, i.e., October 1, 1993.
- There is no reallocation provision in this new legislation.
- The SF-269 report must be submitted annually to the Regional Office.
- Title IV-B, subpart 2, is covered by Executive Order 12372 for the purpose of consolidation and simplification of the State Plan only. Like title IV-B, subpart 1, it is excluded from the intergovernmental review process under the Executive Order.

## PART V. APPLICATION INSTRUCTIONS

### A. Planning

We expect and encourage States to take full advantage of the opportunity to use the 100 percent FY 1994 Federal funds, up to \$1 million, for comprehensive planning and other planning related activities, such as training, technical assistance, assessment, public information and education, and commissioning further analyses. We believe that such planning is critical to the development of a five-year State Plan for services and to the effective establishment of a continuum of services for children and families that includes family support and family preservation services.

To qualify for Federal funding for FY 1994 under title IV-B, Subpart 2, Family Preservation and Support Services, a State must submit an application to the ACF Regional Office. (See optional application preprint at Attachment D.)

All applications must:

1. Provide the name of the State agency that will administer the program. It must be the same agency that administers title IV-B, part 1.
2. Specify the estimated amount of the State's FY 1994 allotment that will be used for planning for family preservation and family support services, including development of a five-year State Plan for services in the context of a comprehensive child welfare services plan.
3. Describe the proposed use of FY 1994 funds for planning activities, including:
  - A description of the process the State will follow or the existing State/local planning processes it will use to ensure that parents, consumers, Indian Tribes, representatives of communities, and a variety of State, local, and non-profit agencies, community-based organizations and individuals having experience with services to vulnerable children and families, including family preservation and family support services, will be actively involved in the planning process;
  - A description of how the State will coordinate the provision of services with representatives of other Federal and federally assisted programs to develop a more comprehensive and integrated service delivery system;
  - A list of planned contacts and a description of the

outreach activities, such as hearings or focus group meetings, that the State will use to ensure that interested parties in the State have an opportunity for active involvement in this planning process; and

- A description of how the State will inform all appropriate parties about this new legislation and the planning, consultation, and coordination provisions.
4. Describe how the State will assess State and local needs (or describe a recently conducted prior planning process which assessed community needs and meets the requirements of this paragraph). The proposed approach to needs assessment should contain enough local detail to support State targeting decisions and include specific data collection strategies on service populations, service needs, available programs, and available resources. Examples of information that may be useful are local area data (including census tract data) on the number and types of child abuse and neglect reports and foster care placements, and data by community on child and family poverty, homelessness, substance abuse, teen pregnancy. (See Attachment C for reference materials on needs assessments.)
  5. Describe how the State will collect information on the nature and scope of existing public and privately funded family preservation and family support programs in the State.  
  
Information about these programs should be used to make informed decisions on investing or expanding existing services or moving in new directions.
  6. Describe other activities the State will carry out to develop the five-year State Plan and implement service system reform, including activities such as:
    - Training and technical assistance; and
    - The approach the State will take to assess the implementation and effectiveness of the family support and family preservation services within the State and their effect on the broader child welfare and family services system.
  7. Supply State FY 1992 summary fiscal data, as shown on the attached application preprint, on federally- or State-funded family support and family preservation programs to enable monitoring of the prohibition against supplantation of funds for these programs.

8. Provide the following general assurances:
- The State will perform administrative procedures determined necessary by the Secretary of HHS, for the proper and efficient operation of the State's program.
  - The State will not use Federal funds provided to the State under this program to supplant Federal or non-Federal funds, including those provided to community-based programs, for existing family preservation or family support services. The State will furnish requested reports to the Secretary of HHS, that demonstrate the State's compliance with the prohibition against supplantation.
  - The State will furnish reports requested by the Secretary of HHS, including the SF-269.
  - The State will participate in any national or local (including local third party) evaluations of the program that may be required by the Secretary of HHS. (A State may be asked to provide information about the number of children served by the new program, State goals on foster care caseloads, and on reports of child abuse and neglect.)
  - The State will not expend (obligate and liquidate) any amount paid under this program for any fiscal year after the end of the immediately succeeding fiscal year.
9. Certify that the State will meet the following certifications contained in the application preprint by signing the first and submitting the two remaining certifications. (The signature of the authorized State official on the application constitutes compliance with the drug-free workplace and the debarment certifications.)
- Anti-Lobbying and Disclosure Form;
  - Drug-Free Workplace Requirements; and
  - Debarment Certification.
10. Provide the name, signature and title of the State agency official certifying compliance with all assurances and certifications associated with the receipt of funds for family preservation and family support services. Also, provide the name, title and telephone number of a State contact person responsible for the planning effort.

## B. Services

A State may apply to use FY 1994 funds for services in the following circumstances:

- a. Any funds over \$1 million used by the State must be used for services.
- b. If, after reviewing the FY 1994 application requirements for planning and the preliminary issues for possible regulatory action for the FY 1995 State Plan (see Attachment E), the State believes it can demonstrate that it has met or is in the process of meeting most of these requirements and will have funds from its allotment not needed for planning or developing the FY 1995 State Plan, it may apply to use these funds for services.

Before authorizing the expenditure of FY 1994 funds for services, we will want to be satisfied, for example, that the State expects to meet the requirements for consultation with community-based organizations, parents, and others in its design and funding of family support programs; that it has completed or expects to complete a needs assessment and obtain both State and local data necessary for services planning and/or expansion; and that it has coordinated with other State agencies and Federal and federally assisted programs in order to develop collaborative arrangements to improve service delivery to vulnerable families. The State also must be able to show how the family preservation and support services to be provided in FY 1994 are related to the State's current title IV-B Services Plan.

We urge States to consult with Regional Office staff as they prepare their FY 1994 application for planning/services. Regional Office staff will clarify requirements, review materials submitted as part of the application, and provide further guidance.

In order to receive funding for services in FY 1994, a State's application must include the following information:

1. Specify the estimated amount of the State's allotment that will be used for services, and the amount the State will contribute (at least 25 percent of the total, i.e., 33 percent of the Federal contribution). Include total estimates of the amounts to be used for training, technical assistance, and administrative costs.
2. Include the findings of a needs assessment or prior planning processes that led to the decision to spend FY 1994 funds for services and to the selection of the type of services, the populations to be served, and the geographic areas for each type of service. Include a description of the needs

assessment/planning process and a list of the organizations and individuals that participated.

3. Describe how representatives from Indian Tribes, cities and communities, groups identified as having expertise in the field of family preservation and family support, parents, consumers, and others participated in the development of the application for FY 1994 services funds.
4. Identify the State's goals for services to vulnerable children and families in FY 1994 and indicate how the funds obtained under this program will assist in meeting these goals. Specifically, describe how these funds will be used to develop or expand family support and family preservation services and strengthen service delivery in the existing child welfare system.

Describe how these funds will link to other services (such as social, educational, juvenile justice, substance abuse, and health and mental health services) to improve the likelihood that children and families will receive care appropriate to meet their multiple needs.

5. Describe separately the family support services and the family preservation services that will be provided using FY 1994 funds. Include a description of the population to which each type of service will be directed and the geographic areas where each type of service will be provided.

Describe the nature and scope of existing public and privately funded family preservation and family support services in the State.

6. Indicate the specific percentage of FY 1994 funds that the State will expend for community-based family support and for family preservation services, respectively, and the rationale for that choice. Include an explanation of how this distribution was reached and why it meets the requirement that a "significant portion" of the service funds must be spent for each service. Examples of important considerations might include the nature of the planning efforts that led to the decision, the level of existing State effort in each area, and the resulting need for new or expanded services. While there is no minimum percentage that defines significant, States should be aware that the rationale will need to be especially strong if the request for either allocation is below 25 percent.
7. Estimate the amount of family support funds which the State will provide to community-based organizations and how organizations will be selected to receive these funds.



8. Specify the following information:

- Describe the types of activities that will be claimed as administrative costs. These typically are the overhead costs associated with personnel, such as State agency rent, utilities, supplies, and so on.
- Describe the types of training and technical assistance activities that will be carried out. (Costs directly associated with the provision of services are not considered administrative costs, e.g., training for individuals to administer or deliver family support or family preservation services.)

9. Provide the following assurances:

- The State will not spend more than ten percent of family support and family preservation service funds on administrative costs.
- The State will spend a significant portion of funds for family preservation and for family support services, respectively.
- The State will not use Federal funds to meet the State's share of costs of services not covered by the amount received under this law.

Note: The State will meet the general assurances in the law (see p. 23) by submitting the signed planning section of this application.

10. Provide the name, signature and title of the State agency official certifying compliance with all assurances and certifications associated with the receipt of funds for family preservation and family support. Also, provide the name, title and telephone number of a State contact person for family support and family preservation services.

INQUIRIES TO:

ACF Regional Administrators



Olivia A. Golden  
Commissioner  
Administration on Children, Youth and  
Families

Attachments:

- A. State Allotments FY 1994 and Estimated State Allotments for FY 1995-98
- B. Statute and Conference Report Language
- C. List of Resources/Models
- D. FY 1994 Application Preprint
- E. FY 1995 State Plan Issues for Regulation
- F. List of ACF Regional Administrators

## **ATTACHMENT A**

FAMILY PRESERVATION AND FAMILY SUPPORT PROGRAM  
FY 1994 State Allotments \*  
Estimated State Allotments FY 1995-98 \*\*

Name of State	FY 94 Allotment @ 60,000,000	FY 95 Allotment @ 150,000,000	FY 96 Allotment @ 225,000,000	FY 97 Allotment @ 240,000,000	FY 98 Allotment @ 255,000,000
Alabama	1,199,639	2,880,911	4,334,445	4,646,141	4,957,838
Alaska	77,754	186,726	280,936	301,139	321,341
Arizona	1,005,253	2,414,096	3,632,104	3,893,294	4,154,484
Arkansas	577,604	1,387,105	2,086,955	2,237,031	2,387,107
California	6,925,694	16,631,924	25,023,389	26,822,863	28,622,330
Colorado	616,481	1,480,468	2,227,423	2,387,600	2,547,778
Connecticut	444,311	1,067,004	1,605,350	1,720,793	1,836,236
Delaware	105,524	253,413	381,271	408,688	436,106
Dist of Col	194,386	466,814	702,341	752,847	803,353
Florida	2,615,879	6,281,986	9,451,497	10,131,169	10,810,840
Georgia	1,555,088	3,734,514	5,618,724	6,022,775	6,426,826
Hawaii	194,386	466,814	702,341	752,847	803,353
Idaho	155,509	373,451	561,872	602,278	642,683
Illinois	2,504,802	6,015,235	9,050,160	9,700,970	10,351,781
Indiana	938,606	2,254,046	3,391,302	3,635,175	3,879,049
Iowa	427,649	1,026,991	1,545,149	1,656,263	1,767,377
Kansas	372,110	893,616	1,344,481	1,441,164	1,537,848
Kentucky	1,083,007	2,600,822	3,913,040	4,194,433	4,475,826
Louisiana	1,888,321	4,534,767	6,822,737	7,313,370	7,804,003
Maine	244,371	586,852	882,942	946,436	1,009,930
Maryland	760,882	1,827,244	2,749,162	2,946,858	3,144,554
Massachusetts	960,822	2,307,396	3,471,569	3,721,215	3,970,861
Michigan	2,304,862	5,535,083	8,327,752	8,926,614	9,525,475
Minnesota	655,358	1,573,831	2,367,891	2,538,170	2,708,448
Mississippi	1,155,208	2,774,210	4,173,910	4,474,062	4,774,214
Missouri	1,149,654	2,760,873	4,153,843	4,452,552	4,751,261
Montana	133,293	320,101	481,605	516,238	550,871
Nebraska	233,263	560,177	842,809	903,416	964,024
Nevada	161,063	386,789	581,939	623,787	665,636
New Hampshire	94,416	226,738	341,137	365,669	390,200
New Jersey	1,132,992	2,720,860	4,093,642	4,388,022	4,682,402
New Mexico	455,419	1,093,679	1,645,484	1,763,813	1,882,142
New York	4,043,228	9,709,736	14,608,684	15,659,216	16,709,749
North Carolina	1,160,762	2,787,548	4,193,976	4,495,572	4,797,167
North Dakota	99,970	240,076	361,204	387,178	413,153
Ohio	2,782,496	6,682,112	10,053,503	10,776,466	11,499,429
Oklahoma	694,236	1,667,194	2,508,359	2,688,739	2,869,119

Oregon	510,957	1,227,055	1,846,152	1,978,912	2,111,672
Pennsylvania	2,360,401	5,668,459	8,528,421	9,141,713	9,755,004
Rhode Island	188,832	453,477	682,274	731,337	780,400
South Carolina	805,313	1,933,945	2,909,697	3,118,937	3,328,178
South Dakota	127,739	306,764	461,538	494,728	527,918
Tennessee	1,327,378	3,187,674	4,795,983	5,140,869	5,485,755
Texas	5,376,160	12,910,748	19,424,733	20,821,595	22,218,457
Utah	294,356	706,890	1,063,544	1,140,025	1,216,506
Vermont	105,524	253,413	381,271	408,688	436,106
Virginia	927,499	2,227,371	3,351,168	3,592,155	3,833,143
Washington	938,606	2,254,046	3,391,302	3,635,175	3,879,049
West Virginia	572,050	1,373,768	2,066,888	2,215,521	2,364,154
Wisconsin	821,975	1,973,957	2,969,897	3,183,467	3,397,037
Wyoming	77,754	186,726	280,936	301,139	321,341
American Samoa	90,857	122,095	149,102	154,893	160,684
Guam	129,726	219,181	296,518	313,102	329,687
Northern Mariana	80,428	96,047	109,551	112,446	115,342
Puerto Rico	1,442,746	3,498,785	5,276,321	5,657,497	6,038,672
Virgin Islands	117,401	188,397	249,776	262,938	276,101
Totals	57,400,000	137,500,000	206,750,000	221,600,000	236,450,000
Set Asides:					
Indians (1%)	600,000	1,500,000	2,250,000	2,400,000	2,550,000
T, TA & Eval	2,000,000	6,000,000	6,000,000	6,000,000	6,000,000
Courts	0	5,000,000	10,000,000	10,000,000	10,000,000
Subtotal	2,600,000	12,500,000	18,250,000	18,400,000	18,550,000
Total for FY	60,000,000	150,000,000	225,000,000	240,000,000	255,000,000

NOTES:

\* FY 1994

State allotments are based on the statutory formula using Food Stamp data (section 433(c)).

Allotments for the territories and insular areas are based on the title IV-B formula (section 433(b)).

The table also includes the set-asides for grants to Indian Tribes and State courts, and grants for research, evaluation, and training and technical assistance (section 430 (d)).

\*\* FY 1995-98

State allotments for these years should be used only for planning purposes. They are based on current information and will need to be revised when future Food Stamp data and appropriations are known.

## **ATTACHMENT B**



## Subchapter C—Human Resources and Income Security Amendments

### SEC. 13701. TABLE OF CONTENTS.

The table of contents of this subchapter is as follows:

Subchapter C—Human Resources and Income Security Amendments

Sec. 13701. Table of contents.

Sec. 13702. References.

#### PART I—CHILD WELFARE SERVICES, FOSTER CARE, AND ADOPTION ASSISTANCE

Sec. 13711. Entitlement funding for services designed to strengthen and preserve families.

Sec. 13712. Entitlement funding for State courts to assess and improve handling of proceedings relating to foster care and adoption.

Sec. 13713. Enhanced match for automated data systems.

Sec. 13714. Permanent extension of independent living program.

Sec. 13715. Training of agency staff and foster and adoptive parents.

Sec. 13716. Moratorium on collection of disallowances.

#### PART II—CHILD SUPPORT ENFORCEMENT

Sec. 13721. State paternity establishment programs.

#### PART III—SUPPLEMENTAL SECURITY INCOME

Sec. 13731. Fees for Federal administration of State supplementary payments.

Sec. 13732. Exclusion from income and resources of State relocation assistance.

Sec. 13733. Prevention of adverse effects on eligibility for, and amount of, benefits when spouse or parent of beneficiary is absent from the household due to active military service.

Sec. 13734. Eligibility for children of Armed Forces personnel residing outside the United States other than in foreign countries.

Sec. 13735. Valuation of certain in-kind support and maintenance when there is a cost of living adjustment in benefits.

Sec. 13736. Exclusion from income of certain amounts received by Indians from interests held in trust.

#### PART IV—AID TO FAMILIES WITH DEPENDENT CHILDREN

Sec. 13741. 50 percent Federal match of State administrative costs.

Sec. 13742. Increase in stepparent income disregard.

#### PART V—UNEMPLOYMENT INSURANCE

Sec. 13751. Extension of current Federal unemployment rate.

#### PART VI—SOCIAL SERVICES IN EMPOWERMENT ZONES AND ENTERPRISE COMMUNITIES

Sec. 13761. Increase in block grants to States for social services.

### SEC. 13702. REFERENCES.

Except as otherwise expressly provided, wherever in this subchapter an amendment or repeal is expressed in terms of an amendment to, or repeal of, a section or other provision, the reference shall be considered to be made to a section or other provision of the Social Security Act.

## PART I—CHILD WELFARE SERVICES, FOSTER CARE, AND ADOPTION ASSISTANCE

SEC. 13711. ENTITLEMENT FUNDING FOR SERVICES DESIGNED TO STRENGTHEN AND PRESERVE FAMILIES.

(a) IN GENERAL.—Part B of title IV (42 U.S.C. 620–628) is amended—

(1) by striking the heading and inserting the following:

## “PART B—CHILD AND FAMILY SERVICES

### “Subpart 1—Child Welfare Services”; and

(2) by adding at the end the following:

### “Subpart 2—Family Preservation and Support Services

“SEC. 430. PURPOSES; LIMITATIONS ON AUTHORIZATIONS OF APPROPRIATIONS; RESERVATION OF CERTAIN AMOUNTS.

“(a) PURPOSES; LIMITATIONS ON AUTHORIZATION OF APPROPRIATIONS.—For the purpose of encouraging and enabling each State to develop and establish, or expand, and to operate a program of family preservation services and community-based family support services, there are authorized to be appropriated to the Secretary the amounts described in subsection (b) for the fiscal years specified in subsection (b).

“(b) DESCRIPTION OF AMOUNTS.—The amount described in this subsection is—

“(1) for fiscal year 1994, \$60,000,000;

“(2) for fiscal year 1995, \$160,000,000;

“(3) for fiscal year 1996, \$225,000,000;

“(4) for fiscal year 1997, \$240,000,000; or

“(5) for fiscal year 1998, the greater of—

“(A) \$255,000,000; or

“(B) the amount described in this subsection for fiscal year 1997, increased by the inflation percentage applicable to fiscal year 1998.

“(c) INFLATION PERCENTAGE.—For purposes of subsection (b)(5)(B) of this section, the inflation percentage applicable to any fiscal year is the percentage (if any) by which—

“(1) the average of the Consumer Price Index (as defined in section 1(f)(5) of the Internal Revenue Code of 1986) for the 12-month period ending on December 31 of the immediately preceding fiscal year, exceeds

“(2) the average of the Consumer Price Index (as so defined) for the 12-month period ending on December 31 of the 2nd preceding fiscal year.

“(d) RESERVATION OF CERTAIN AMOUNTS.—

“(1) EVALUATION, RESEARCH, TRAINING, AND TECHNICAL ASSISTANCE.—The Secretary shall reserve \$2,000,000 of the amount described in subsection (b) for fiscal year 1994, and \$6,000,000 of the amounts so described for each of fiscal years 1995, 1996, 1997, and 1998, for expenditure by the Secretary—

“(A) for research, training, and technical assistance related to the program under this subpart; and

“(B) for evaluation of State programs funded under this subpart and any other Federal, State, or local program, regardless of whether federally assisted, that is designed to achieve the same purposes as the program under this subpart.

"(2) STATE COURT ASSESSMENTS.—The Secretary shall reserve \$5,000,000 of the amount described in subsection (b) for fiscal year 1995, and \$10,000,000 of the amounts so described for each of fiscal years 1996, 1997, and 1998, for grants under section 13712 of the Omnibus Budget Reconciliation Act of 1993.

"(3) INDIAN TRIBES.—The Secretary shall reserve 1 percent of the amounts described in subsection (b) for each fiscal year, for allotment to Indian tribes in accordance with section 433(a).

—SEC. 431. DEFINITIONS.

"(a) IN GENERAL.—As used in this subpart:

"(1) FAMILY PRESERVATION SERVICES.—The term 'family preservation services' means services for children and families designed to help families (including adoptive and extended families) at risk or in crisis, including—

"(A) service programs designed to help children—

"(i) where appropriate, return to families from which they have been removed; or

"(ii) be placed for adoption, with a legal guardian, or, if adoption or legal guardianship is determined not to be appropriate for a child, in some other planned, permanent living arrangement;

"(B) preplacement preventive services programs, such as intensive family preservation programs, designed to help children at risk of foster care placement remain with their families;

"(C) service programs designed to provide followup care to families to whom a child has been returned after a foster care placement;

"(D) respite care of children to provide temporary relief for parents and other caregivers (including foster parents); and

"(E) services designed to improve parenting skills (by reinforcing parents' confidence in their strengths, and helping them to identify where improvement is needed and to obtain assistance in improving those skills) with respect to matters such as child development, family budgeting, coping with stress, health, and nutrition.

"(2) FAMILY SUPPORT SERVICES.—The term 'family support services' means community-based services to promote the well-being of children and families designed to increase the strength and stability of families (including adoptive, foster, and extended families), to increase parents' confidence and competence in their parenting abilities, to afford children a stable and supportive family environment, and otherwise to enhance child development.

"(3) STATE AGENCY.—The term 'State agency' means the State agency responsible for administering the program under subpart 1.

"(4) STATE.—The term 'State' includes an Indian tribe or tribal organization, in addition to the meaning given such term for purposes of subpart 1.

"(5) TRIBAL ORGANIZATION.—The term 'tribal organization' means the recognized governing body of any Indian tribe.

"(6) INDIAN TRIBE.—The term 'Indian tribe' means any Indian tribe (as defined in section 482(i)(5)) and any Alaska Native organization (as defined in section 482(i)(7)(A)).

"(b) OTHER TERMS.—For other definitions of other terms used in this subpart, see section 475.

—SEC. 432. STATE PLANS.

"(a) PLAN REQUIREMENTS.—A State plan meets the requirements of this subsection if the plan—

"(1) provides that the State agency shall administer, or supervise the administration of, the State program under this subpart;

"(2)(A)(i) sets forth the goals intended to be accomplished under the plan by the end of the 5th fiscal year in which the plan is in operation in the State, and (ii) is updated periodically to set forth the goals intended to be accomplished under the plan by the end of each 5th fiscal year thereafter;

"(B) describes the methods to be used in measuring progress toward accomplishment of the goals;

"(C) contains assurances that the State—

"(i) after the end of each of the 1st 4 fiscal years covered by a set of goals, will perform an interim review of progress toward accomplishment of the goals, and on the basis of the interim review will revise the statement of goals in the plan, if necessary, to reflect changed circumstances; and

"(ii) after the end of the last fiscal year covered by a set of goals, will perform a final review of progress toward accomplishment of the goals, and on the basis of the final review (I) will prepare, transmit to the Secretary, and make available to the public a final report on progress toward accomplishment of the goals, and (II) will develop (in consultation with the entities required to be consulted pursuant to subsection (b)) and add to the plan a statement of the goals intended to be accomplished by the end of the 5th succeeding fiscal year;

"(3) provides for coordination, to the extent feasible and appropriate, of the provision of services under the plan and the provision of services or benefits under other Federal or federally assisted programs serving the same populations;

"(4) contains assurances that not more than 10 percent of expenditures under the plan for any fiscal year with respect to which the State is eligible for payment under section 434 for the fiscal year shall be for administrative costs, and that the remaining expenditures shall be for programs of family preservation services and community-based family support services with significant portions of such expenditures for each such program;

"(5) contains assurances that the State will—

"(A) annually prepare, furnish to the Secretary, and make available to the public a description (including separate descriptions with respect to family preservation services and community-based family support services) of—

"(i) the service programs to be made available under the plan in the immediately succeeding fiscal year;

"(ii) the populations which the programs will serve; and

"(iii) the geographic areas in the State in which the services will be available; and

"(B) perform the activities described in subparagraph (A) —

"(i) in the case of the 1st fiscal year under the plan, at the time the State submits its initial plan; and

"(ii) in the case of each succeeding fiscal year, by the end of the 3rd quarter of the immediately preceding fiscal year;

"(6) provides for such methods of administration as the Secretary finds to be necessary for the proper and efficient operation of the plan;

"(7)(A) contains assurances that Federal funds provided to the State under this subpart will not be used to supplant Federal or non-Federal funds for existing services and activities which promote the purposes of this subpart; and

"(B) provides that the State will furnish reports to the Secretary, at such times, in such format, and containing such information as the Secretary may require, that demonstrate the State's compliance with the prohibition contained in subparagraph (A); and

"(8) provides that the State agency will furnish such reports, containing such information, and participate in such evaluations, as the Secretary may require.

"(b) APPROVAL OF PLANS. —

"(1) IN GENERAL. — The Secretary shall approve a plan that meets the requirements of subsection (a) only if the plan was developed jointly by the Secretary and the State, after consultation by the State agency with appropriate public and nonprofit private agencies and community-based organizations with experience in administering programs of services for children and families (including family preservation and family support services).

"(2) PLANS OF INDIAN TRIBES. —

"(A) EXEMPTION FROM INAPPROPRIATE REQUIREMENTS. — The Secretary may exempt a plan submitted by an Indian tribe from any requirement of this section that the Secretary determines would be inappropriate to apply to the Indian tribe, taking into account the resources, needs, and other circumstances of the Indian tribe.

"(B) SPECIAL RULE. — Notwithstanding subparagraph (A) of this paragraph, the Secretary may not approve a plan of an Indian tribe under this subpart to which (but for this subparagraph) an allotment of less than \$10,000 would be made under section 433(a) if allotments were made under section 433(a) to all Indian tribes with plans approved under this subpart with the same or larger numbers of children.

"SEC. 432. ALLOTMENTS TO STATES.

"(a) INDIAN TRIBES. — From the amount reserved pursuant to section 430(d)(3) for any fiscal year, the Secretary shall allot to each Indian tribe with a plan approved under this subpart an amount

that bears the same ratio to such reserved amount as the number of children in the Indian tribe bears to the total number of children in all Indian tribes with State plans so approved, as determined by the Secretary on the basis of the most current and reliable information available to the Secretary.

"(b) TERRITORIES. — From the amount described in section 430(b) for any fiscal year that remains after applying section 430(d) for the fiscal year, the Secretary shall allot to each of the jurisdictions of Puerto Rico, Guam, the Virgin Islands, the Northern Mariana Islands, and American Samoa an amount determined in the same manner as the allotment to each of such jurisdictions is determined under section 421.

"(c) OTHER STATES. —

"(1) IN GENERAL. — From the amount described in section 430(b) for any fiscal year that remains after applying section 430(d) and subsection (b) of this section for the fiscal year, the Secretary shall allot to each State (other than an Indian tribe) which is not specified in subsection (b) of this section an amount equal to such remaining amount multiplied by the food stamp percentage of the State for the fiscal year.

"(2) FOOD STAMP PERCENTAGE DEFINED. —

"(A) IN GENERAL. — As used in paragraph (1) of this subsection, the term 'food stamp percentage' means, with respect to a State and a fiscal year, the average monthly number of children receiving food stamp benefits in the State for months in the 3 fiscal years referred to in subparagraph (B) of this paragraph, as determined from sample surveys made under section 16(c) of the Food Stamp Act of 1977, expressed as a percentage of the average monthly number of children receiving food stamp benefits in the States described in such paragraph (1) for months in such 3 fiscal years, as so determined.

"(B) FISCAL YEARS USED IN CALCULATION. — For purposes of the calculation pursuant to subparagraph (A), the Secretary shall use data for the 3 most recent fiscal years, preceding the fiscal year for which the State's allotment is calculated under this subsection, for which such data are available to the Secretary.

"SEC. 434. PAYMENTS TO STATES.

"(a) ENTITLEMENT. —

"(1) GENERAL RULE. — Except as provided in paragraph (2) of this subsection, each State which has a plan approved under this subpart shall be entitled to payment of the lesser of —

"(A) 75 percent of the total expenditures by the State for activities under the plan during the fiscal year or the immediately succeeding fiscal year; or

"(B) the allotment of the State under section 433 for the fiscal year.

"(2) SPECIAL RULE. — Upon submission by a State to the Secretary during fiscal year 1994 of an application in such form and containing such information as the Secretary may require (including, if the State is seeking payment of an amount pursuant to subparagraph (B) of this paragraph, a description



of the services to be provided with the amount), the State shall be entitled to payment of an amount equal to the sum of—

"(A) such amount, not exceeding \$1,000,000, from the allotment of the State under section 433 for fiscal year 1994, as the State may require to develop and submit a plan for approval under section 432; and

"(B) an amount equal to the lesser of—

services to children and the expenditures by the State for the application and families in accordance with 432(a)(4); or

"(ii) the allotment of the State under section 433 for fiscal year 1994, reduced by any amount paid to the State pursuant to subparagraph (A) of this paragraph.

#### "(b) PROHIBITIONS.—

"(1) NO USE OF OTHER FEDERAL FUNDS FOR STATE MATCH.—Each State receiving an amount paid under paragraph (1) or (2)(B) of subsection (a) may not expend any Federal funds to meet the costs of services described in this subpart not covered by the amount so paid.

"(2) AVAILABILITY OF FUNDS.—A State may not expend any amount paid under subsection (a)(1) for any fiscal year after the end of the immediately succeeding fiscal year.

"(c) DIRECT PAYMENTS TO TRIBAL ORGANIZATIONS OF INDIAN TRIBES.—The Secretary shall pay any amount to which an Indian tribe is entitled under this section directly to the tribal organization of the Indian tribe.

#### "SEC. 434. EVALUATIONS.—

##### "(a) EVALUATIONS.—

"(1) IN GENERAL.—The Secretary shall evaluate the effectiveness of the programs carried out pursuant to this subpart in accomplishing the purposes of this subpart, any may evaluate and any other Federal, State, or local program, regardless of whether federally assisted, that is designed to achieve the same purposes as the program under this subpart, in accordance with criteria established in accordance with paragraph (2).

"(2) CRITERIA TO BE USED.—In developing the criteria to be used in evaluations under paragraph (1), the Secretary shall consult with appropriate parties, such as—

"(A) State agencies administering programs under this part and part E;

"(B) persons administering child and family services programs (including family preservation and family support programs) for private, nonprofit organizations with an interest in child welfare; and

"(C) other persons with recognized expertise in the evaluation of child and family services programs (including family preservation and family support programs) or other related programs.

"(b) COORDINATION OF EVALUATIONS.—The Secretary shall develop procedures to coordinate evaluations under this section, to the extent feasible, with evaluations by the States of the effectiveness of programs under this subpart."

#### (b) CONFORMING AMENDMENTS.—

(1) Section 422 (42 U.S.C. 622) is amended—

(A) in subsection (a), by striking "this part" and inserting "this subpart";

(B) in subsection (b), by striking "this part" each place such term appears and inserting "this subpart"; and

(C) in subsection (b)(2), by inserting "under the State plan approved under subpart 2 of this part," after "part A of this title,"

(2) Section 423(a) (42 U.S.C. 623(a)) is amended by striking "this part" and inserting "this subpart".

(3) Section 428(a) (42 U.S.C. 628(a)) is amended by striking "this part" each place such term appears and inserting "this subpart".

(4) Section 471(a)(2) (42 U.S.C. 671(a)(2)) is amended by inserting "subpart 1 of" before "part B".

(c) EFFECTIVE DATE.—The amendments made by this section shall be effective with respect to calendar quarters beginning on or after October 1, 1993.

#### SEC. 13712. ENTITLEMENT FUNDING FOR STATE COURTS TO ASSESS AND IMPROVE HANDLING OF PROCEEDINGS RELATING TO FOSTER CARE AND ADOPTION.

(a) IN GENERAL.—The Secretary shall make grants, in accordance with this section, to the highest State courts in States participating in the program under part E of title IV of the Social Security Act, for the purpose of enabling such courts—

(1) to conduct assessments, in accordance with such requirements as the Secretary shall publish, of the role, responsibilities, and effectiveness of State courts in carrying out State laws requiring proceedings (conducted by or under the supervision of the courts)—

(A) that implement parts B and E of title IV of such Act;

(B) that determine the advisability or appropriateness of foster care placement;

(C) that determine whether to terminate parental rights; and

(D) that determine whether to approve the adoption or other permanent placement of a child; and

(2) to implement changes deemed necessary as a result of the assessments.

(b) APPLICATIONS.—In order to be eligible for a grant under this section, a highest State court shall submit to the Secretary an application at such time, in such form, and including such information and assurances as the Secretary shall require.

#### (c) ALLOTMENTS.—

(1) IN GENERAL.—Each highest State court which has an application approved under subsection (b), and is conducting assessment activities in accordance with this section, shall be entitled to payment, for each of fiscal years 1995 through 1998, from amounts reserved pursuant to section 430(d)(2) of the Social Security Act, of an amount equal to the sum of—

(A) for fiscal year 1995, \$75,000 plus the amount described in paragraph (2) for fiscal year 1995; and

(B) for each of fiscal years 1996 through 1998, \$85,000 plus the amount described in paragraph (2) for each of such fiscal years.

(2) **FORMULA.**—The amount described in this paragraph for any fiscal year is the amount that bears the same ratio to the amount reserved pursuant to section 430(d)(2) of the Social Security Act for the fiscal year (reduced by the dollar amount specified in paragraph (1) of this subsection for the fiscal year) as the number of individuals in the State who have not attained 21 years of age bears to the total number of such individuals in all States the highest State courts of which have approved applications under subsection (b).

(d) **USE OF GRANT FUNDS.**—Each highest State court which receives funds paid under this section may use such funds to pay—  
(1) any or all costs of activities under this section in fiscal year 1995; and

(2) not more than 75 percent of the cost of activities under this section in each of fiscal years 1996, 1997, and 1998.

#### SEC. 13713. ENHANCED MATCH FOR AUTOMATED DATA SYSTEMS.

(a) **PAYMENTS TO STATES.**—

(1) **IN GENERAL.**—Section 474(a)(3) (42 U.S.C. 674(a)(3)) is amended—

(A) by striking “and” at the end of subparagraph (B);  
(B) by redesignating subparagraph (C) as subparagraph (E); and

(C) by inserting after subparagraph (B) the following:  
“(C) 75 percent of so much of such expenditures as are for the planning, design, development, or installation of statewide mechanized data collection and information retrieval systems (including 75 percent of the full amount of expenditures for hardware components for such systems) but only to the extent that such systems—

“(i) meet the requirements imposed by regulations promulgated pursuant to section 479(b)(2);

“(ii) to the extent practicable, are capable of interfacing with the State data collection system that collects information relating to child abuse and neglect;

“(iii) to the extent practicable, have the capability of interfacing with, and retrieving information from, the State data collection system that collects information relating to the eligibility of individuals under part A (for the purposes of facilitating verification of eligibility of foster children); and

“(iv) are determined by the Secretary to be likely to provide more efficient, economical, and effective administration of the programs carried out under a State plan approved under part B of this part; and

“(D) 50 percent of so much of such expenditures as are for the operation of the statewide mechanized data collection and information retrieval systems referred to in subparagraph (C); and.”

(2) **TREATMENT OF STATE EXPENDITURES FOR DATA COLLECTION AND INFORMATION RETRIEVAL SYSTEMS.**—Section 474 (42 U.S.C. 674) is amended by adding at the end the following:

“(e) **AUTOMATED DATA COLLECTION EXPENDITURES.**—The Secretary shall treat as necessary for the proper and efficient administration of the State plan all expenditures of a State necessary in order for the State to plan, design, develop, install, and operate data collection and information retrieval systems described in subsection (a)(3)(C), without regard to whether the systems may be used with respect to foster or adoptive children other than those on behalf of whom foster care maintenance payments or adoption assistance payments may be made under this part.”

(3) **EFFECTIVE DATE.**—The amendments made by this subsection shall take effect on October 1, 1993.

(b) **TERMINATION OF ENHANCED MATCH.**—

(1) **IN GENERAL.**—Section 474(a)(3)(C) (42 U.S.C. 674(a)(3)(C)), as amended by subsection (a) of this section, is amended by striking “75 percent” each place such term appears and inserting “50 percent”.

(2) **EFFECTIVE DATE.**—The amendment made by paragraph (1) shall apply to expenditures during fiscal years beginning on or after October 1, 1996.

#### SEC. 13714. PERMANENT EXTENSION OF INDEPENDENT LIVING PROGRAM.

(a) **IN GENERAL.**—Section 477 (42 U.S.C. 677) is amended—

(1) in subsection (a)(1), by striking the 3rd sentence;

(2) in subsection (c), by striking “of the fiscal years 1988 through 1992” and inserting “succeeding fiscal year”;

(3) in subsection (e)(1)(A), by striking “each of the fiscal years 1987 through 1992” and inserting “fiscal year 1987 and any succeeding fiscal year”;

(4) in subsection (e)(1)(B), by striking “fiscal years 1991 and 1992” and inserting “fiscal year 1991 and any succeeding fiscal year”; and

(5) in subsection (e)(1)(C)(ii), by striking “fiscal year 1992” and inserting “any succeeding fiscal year”.

(b) **EFFECTIVE DATE.**—The amendments made by subsection (a) shall apply to activities engaged in on or after October 1, 1992.

#### SEC. 13715. TRAINING OF AGENCY STAFF AND FOSTER AND ADOPTIVE PARENTS.

Section 8006(b) of the Omnibus Budget Reconciliation Act of 1989 (42 U.S.C. 674 note) is amended by inserting “, and to expenditures made on or after October 1, 1993” before the period.

#### SEC. 13716. MORATORIUM ON COLLECTION OF DISALLOWANCES.

The Secretary of Health and Human Services shall not, before October 1, 1994—

(1) reduce any payment to, withhold any payment from, or seek any repayment from any State under part B or E of title IV of the Social Security Act by reason of a determination made in connection with a review of State compliance with section 427 of such Act for any Federal fiscal year before fiscal year 1995; or

(2) reduce any payment to, withhold any payment from, or seek any repayment from any State under such part E by reason of a determination made in connection with any on-site

Federal financial review, or any audit conducted by the Inspector General using similar methodologies.

## PART II—CHILD SUPPORT ENFORCEMENT

### SEC. 13731. STATE PATERNITY ESTABLISHMENT PROGRAMS.

(a) PERFORMANCE STANDARDS.—Section 452(g) (42 U.S.C. 652(g)) is amended—

- (1) in paragraph (1)—
  - (A) by striking "1991" and inserting "1994";
  - (B) by inserting "is based on reliable data and" before "equals or exceeds";
  - (C) by inserting "(rounded to the nearest whole percentage point)" before "equals"; and
  - (D) by striking subparagraphs (A), (B), and (C) and inserting the following:
 

"(A) 75 percent;

"(B) for a State with a paternity establishment percentage of not less than 50 percent but less than 75 percent for such fiscal year, the paternity establishment percentage of the State for the immediately preceding fiscal year plus 3 percentage points;

"(C) for a State with a paternity establishment percentage of not less than 45 percent but less than 50 percent for such fiscal year, the paternity establishment percentage of the State for the immediately preceding fiscal year plus 4 percentage points;

"(D) for a State with a paternity establishment percentage of not less than 40 percent but less than 45 percent for such fiscal year, the paternity establishment percentage of the State for the immediately preceding fiscal year plus 5 percentage points;

or

"(E) for a State with a paternity establishment percentage of less than 40 percent for such fiscal year, the paternity establishment percentage of the State for the immediately preceding fiscal year plus 6 percentage points."; and

(2) in paragraph (2)—

- (A) in subparagraph (A)—
  - (i) by striking "(or under all such plans)" each place such term appears and inserting "or E";
  - (ii) in clause (i), by inserting "during the fiscal year" before the comma;
  - (iii) in clause (ii)—
    - (I) in subclause (I), by striking "for such" and inserting "as of the end of the"; and
    - (II) in subclause (II), by striking "for the" and inserting "as of the end of the";
  - (iv) in clause (iii), by inserting "or acknowledged during the fiscal year" before the comma; and
  - (v) in the matter following clause (iii)—
    - (I) by striking "have been" and inserting "were";
    - (II) by inserting "during the immediately preceding fiscal year" after "wedlock";
    - (III) by striking "is being" and inserting "was being";

(IV) by striking "for such" and inserting "as of the end of such preceding";

(V) by striking "are being" and inserting "were being"; and

(VI) by striking "for the" and inserting "as of the end of such preceding";

(B) by striking subparagraph (B) and inserting the following:

"(B) the term 'reliable data' means the most recent data available which are found by the Secretary to be reliable for purposes of this section.";

(C) by inserting "unless paternity is established for such child" after "the death of a parent"; and

(D) by inserting "or any child with respect to whom the State agency administering the plan under part E determines (as provided in section 454(4)(B)) that it is against the best interests of such child to do so" after "cooperate under section 402(a)(26)".

(b) STATE PLAN REQUIREMENTS FOR THE ESTABLISHMENT OF PATERNITY.—Section 466(a) (42 U.S.C. 666(a)) is amended—

(1) in paragraph (2)—

(A) by striking "at the option of the State."; and

(B) by inserting "or paternity establishment" after "support order issuance and enforcement";

(2) in paragraph (5), by adding at the end the following:

"(C) Procedures for a simple civil process for voluntarily acknowledging paternity under which the State must provide that the rights and responsibilities of acknowledging paternity are explained and ensure that due process safeguards are afforded. Such procedures must include a hospital-based program for the voluntary acknowledgment of paternity during the period immediately before or after the birth of a child.

"(D) Procedures under which the voluntary acknowledgment of paternity creates a rebuttable, or at the option of the State, conclusive presumption of paternity, and under which such voluntary acknowledgment is admissible as evidence of paternity.

"(E) Procedures under which the voluntary acknowledgment of paternity must be recognized as a basis for seeking a support order without requiring any further proceedings to establish paternity.

"(F) Procedures which provide that (i) any objection to genetic testing results must be made in writing within a specified number of days before any hearing at which such results may be introduced into evidence, and (ii) if no objection is made, the test results are admissible as evidence of paternity without the need for foundation testimony or other proof of authenticity or accuracy.

"(G) Procedures which create a rebuttable or, at the option of the State, conclusive presumption of paternity upon genetic testing results indicating a threshold probability that the alleged father is the father of the child.

DEFINITION OF FAMILY SUPPORT SERVICES FROM THE  
CONFERENCE COMMITTEE REPORT

..."The conferees intend that the term "family support services" include the following community-based services:

(1) services, including in-home visits, parent support groups, and other programs, designed to improve parenting skills (by reinforcing parents' confidence in their strengths, and helping them to identify where improvement is needed and to obtain assistance in improving those skills) with respect to matters such as child development, family budgeting, coping with stress, health, and nutrition;

(2) respite care of children to provide temporary relief for parents and other caregivers;

(3) structured activities involving parents and children to strengthen the parent-child relationship;

(4) drop-in centers to afford families opportunities for informal interaction with other families and with program staff;

(5) information and referral services to afford families access to other community services, including child care, health care, nutrition programs, adult education and literacy programs, and counseling and mentoring services; and

(6) early developmental screening of children to assess the needs of such children, and assistance to families in securing specific services to meet these needs."



## **ATTACHMENT C**

## ATTACHMENT C

### FAMILY SUPPORT AND FAMILY PRESERVATION RESOURCES

- PART I. NATIONAL RESOURCE AND RESEARCH CENTERS
- PART II. NATIONAL ORGANIZATIONS AND FOUNDATIONS INVOLVED WITH FAMILY SUPPORT AND PRESERVATION
- PART III. EXAMPLES OF COMMUNITY BASED AND STATE PROGRAMS
- PART IV. OFFICES THAT ADMINISTER FEDERAL PROGRAMS FOR CHILDREN AND THEIR FAMILIES
- PART V. INFORMATION ON SOME RELATED PROGRAMS
- PART VI. BIBLIOGRAPHY (Partial)

The list of programs and resources included in Attachment C are examples of family support and family preservation programs. The list is not intended to be inclusive or to be considered as endorsement of the specific program by the Federal government.

## **PART I. NATIONAL RESOURCE AND RESEARCH CENTERS**

*The following are examples of national resource and research centers that provide assistance in the areas of family support, family preservation, child welfare, public health, collaboration and coordination, systems integration, management and other issues. This list is not inclusive. Please feel free to submit information about additional resource and research centers to the Administration on Children, Youth, and Families, 330 C Street, SW, Room 2026, Washington, DC 20201.*

ARCH National Resource Center for Crisis Nurseries and Respite Care Services  
Chapel Hill Training Outreach Project  
800 Eastowne Drive  
Suite 105  
Chapel Hill, NC 27514  
(919) 490-5577  
(919) 490-4905 (FAX)

Berkeley Child Welfare Research Center  
1950 Addison Street  
Suite 104  
Berkeley, CA 94704  
(510) 643-7016  
(510) 642-1895 (FAX)

Center for Child Welfare Policy Research  
The Center for the Study of Social Policy  
1250 Eye Street, NW  
Suite 503  
Washington, DC 20005  
(202) 371-1565  
(202) 371-1472

Chapel Hill Training-Outreach Project  
800 Eastowne Drive, Suite 105  
Chapel Hill, NC 27514  
(919) 490-5577  
(800) 472-1727  
(919) 490-4905 (FAX)

Child Welfare Research Center  
Chapin Hall Center for Children  
1155 E. 60th Street  
Chicago, IL 60637  
(312) 753-5958  
(312) 753-5940 (FAX)

Frank Porter Graham Child Development Center  
Evaluation Research Office  
University of North Carolina-Chapel Hill  
Chapel Hill, NC 27599-8180  
(919) 966-5038  
(919) 966-7532 (FAX)

Georgetown Child and Adolescent Services System Program (CASSP)  
Technical Assistance Center (for strategic planning)  
Georgetown Child Development Center  
2233 Wisconsin Ave., NW  
Suite 215  
Washington, DC 20007  
(202) 338-1831  
(202) 338-0860

Management and Administration Resource Center  
University of Southern Maine  
96 Falmouth Street  
Portland, ME 04103  
(207) 708-4436  
(207) 780-4417

National Center for Education in Maternal and Child Health  
2000 15th Street, North  
Suite 701  
Arlington, VA 22201-2617  
(703) 524-7802  
(703) 524-9335

National Center for Missing and Exploited Children  
2101 Wilson Boulevard  
Suite 550  
Arlington, VA 22201-3052  
(703) 235-3900  
(800) 843-5678 (HOTLINE)  
(800) 826-7653 (TDD HOTLINE)  
(703) 235-4067 (FAX)

National Clearinghouse on Runaway and Homeless Youth  
P.O. Box 13505  
Silver Spring, MD 20911-3505  
(301) 608-8098  
(301) 587-4352 (FAX)

National Foster Care Resource Center  
Institute for the Study of Children and Families  
Eastern Michigan University  
Ypsilanti, MI 48197  
(313) 487-0372  
(313) 487-0284 (FAX)

National Legal Resource Center for Child Welfare  
American Bar Association  
1800 M Street, NW  
Suite S-300  
Washington, DC 20036  
(202) 331-2250  
(202) 331-2220/5

National Resource Center for Family Support Programs  
200 S. Michigan Avenue  
Suite 1520  
Chicago, IL 60604  
(312) 341-0900  
(312) 341-9361 (FAX)

National Resource Center for the Prevention of Perinatal Abuse of  
Alcohol and Other Drugs  
Center for Substance Abuse Prevention  
9300 Lee Highway  
Fairfax, VA 22031  
(703) 218-5600  
(800) 354-8824  
(703) 218-5701 (FAX)

National Resource Center for Special Needs Adoption  
16250 Northland Drive  
Suite 120  
Southfield, MI 48075  
(313) 443-7080  
(313) 443-7099 (FAX)

National Resource Center on Child Abuse and Neglect  
63 Inveness Drive East  
Englewood, CO 80112-5117  
(303) 792-9900  
(800) 227-5242  
(303) 792-5333 (FAX)

National Resource Center on Child Sexual Abuse  
107 Lincoln Street  
Huntsville, AL 35801  
(205) 534-6868  
(800) KIDS-006  
(205) 534-6883

National Resource Center on Family Based Services  
Room 112, North Hall  
University of Iowa  
Iowa City, IA 52242  
(319) 335-2200  
(319) 335-2204 (FAX)

Texas Respite Resource Network  
Santa Rosa Children's Hospital  
P.O. Box 7330  
San Antonio, TX 78207  
(512) 228-2794  
(512) 228-2797 (FAX)

The University of Oklahoma  
National Resource Center for Youth Services  
202 West 8th Street  
Tulsa, OK 74119-1419  
(918) 585-2986  
(918) 592-1841 (FAX)

(As of December 21, 1993)



## **PART II. NATIONAL ORGANIZATIONS AND FOUNDATIONS INVOLVED WITH FAMILY SUPPORT AND PRESERVATION**

*The following are examples of national organizations and foundations that are involved in family support, family preservation, child welfare, public health, family policy, collaboration and coordination, systems integration, management, evaluation, and other issues. This list is not inclusive. Please feel free to submit information about additional organizations and foundations to the Administration on Children, Youth, and Families, 330 C Street, SW, Room 2026, Washington, DC 20201.*

American Association of Marriage and Family Therapists  
Family Impact Seminar  
1100 17th Street, NW, 10th Floor  
Washington, DC 20036  
(202) 467-5114  
(202) 223-2329 (FAX)

American Civil Liberties Union  
Children's Rights Project  
132 West 43rd Street  
New York, NY 10036  
(212) 944-9800  
(212) 921-7916 (FAX)

American Public Welfare Association  
810 First Street, NE, Suite 500  
Washington, DC 20002-4267  
(202) 628-0100  
(202) 289-6555 (FAX)

Annie E. Casey Foundation  
One Lafayette Place  
Greenwich, CT 06830  
(203) 661-2773  
(203) 661-5127 (FAX)

Center for the Study of Family Policy  
Hunter College  
695 Park Avenue, E. Bldg. 1209C  
New York, NY 10021  
(212) 772-4450  
(212) 650-3845 (FAX)

Center for the Study of Social Policy  
1250 Eye Street, NW  
Suite 503  
Washington, DC 20005  
(202) 371-1565  
(202) 371-1472 (FAX)

Child and Family Policy Center  
100 Court Avenue, Suite 312  
Des Moines, IA 50309  
(515) 243-2000  
(515) 243-5941 (FAX)

Child Welfare League of America  
440 First Street, NW, Suite 310  
Washington, DC 20001  
(202) 638-2952  
(202) 638-4004 (FAX)

Children's Defense Fund  
25 E Street, NW  
Washington, DC 20001  
(202) 628-8787  
(202) 662-3520 (FAX)

Communications Consortium Media Center  
1333 H Street, NW, Suite 700  
Washington, DC 20005  
(202) 628-1270  
(202) 628-2115 (FAX)

//  
Edna McConnell Clark Foundation  
250 Park Avenue, Suite 900  
New York, NY 10017  
(212) 551-9100  
(212) 986-4558 (FAX)

Family Resource Coalition  
200 S. Michigan Ave, Suite 1520  
Chicago, IL 60604  
(312) 341-0900  
(312) 341-9361 (FAX)

Florida Mental Health Institute  
University of South Florida  
Department of Child and Family Studies  
13301 Bruce B. Downs Blvd.  
Tampa, FL 33612-3899  
(910) 288-8693  
(404) 587-1968 (FAX)

Ford Foundation  
320 East 43rd Street  
New York, NY 10017  
(212) 573-5000

Foster Care Project  
American Bar Association  
Center on Children and the Law  
1800 M Street, NW, Suite 200S  
Washington, DC 20036  
(202) 331-2250  
(202) 331-2225 (FAX)

HIPPY USA  
National Council of Jewish Women  
53 West 23rd Street  
New York, NY 10010  
(212) 645-4048

Homebuilders  
Behavioral Sciences Institute  
181 S. 333rd, Suite 200  
Federal Way, WA 98003-6307  
(206) 927-1500  
(206) 838-1670

Intensive Family Preservation Services National Network  
Hennepin County Community Services Department  
Executive Office  
A-1005 Government Center  
Minneapolis, MN 55487-0105  
(612) 348-3454  
(612) 348-9908 (FAX)

Juvenile Law Center of Philadelphia  
801 Arch Street, Suite 610  
Philadelphia, PA 19107  
(215) 625-0551  
(215) 625-9589 (FAX)

Kellogg Foundation  
400 North Avenue  
Battle Creek, MI 49017-3398  
(616) 968-1611

National Alliance of Children's Trust and Prevention Funds  
P.O. Box 1641  
1719 Southridge  
Jefferson City, MO 65102  
(314) 751-0635  
(314) 751-0254 (FAX)

National Association of Child Advocates  
1625 K Street, NW Suite 510  
Washington, DC 20006  
(202) 828-6950  
(202) 828-6956 (FAX)

National Association of Community Action Agencies  
1826 18th Street, NW  
Washington, DC 20009  
(202) 265-7546  
(202) 265-8850 (FAX)

National Association of Family Based Services  
Wake County Department of Social Services  
336 Sayetteville St. Mall  
Raleigh, NC 27602  
(919) 856-7433  
(919) 856-6696 (FAX)

National Association of Social Workers  
750 First Street, NE  
Washington, DC 20002  
(202) 408-8600  
(202) 336-8310 (FAX)

National CASA Association  
2722 East Lake Avenue East, Suite 220  
Seattle, WA 98102  
(206) 328-8588  
(206) 323-8137 (FAX)

National Center for Children in Poverty  
Columbia University School of Public Health  
154 Haven Avenue  
New York, NY 10032  
(212) 927-8793  
(212) 927-9162 (FAX)

National Center on Family Literacy  
401 South 4th Avenue, Suite 610  
Louisville, KY 40202  
(502) 584-1133

National Committee for Prevention of Child Abuse / Healthy Families America  
332 S. Michigan Avenue, Suite 1600  
Chicago, IL 60604  
(312) 663-3520  
(312) 939-8962 (FAX)

National Community Action Foundation  
2100 M Street, NW  
Washington, DC 20037  
(202) 775-0223  
(202) 775-0225 (FAX)

National Conference of State Legislatures  
Child Welfare Project  
1560 Broadway, Suite 700  
Denver, CO 80202  
(303) 830-2700

National Congress of American Indians  
900 Pennsylvania Avenue, SE  
Washington, DC 20003  
(202) 546-9404

National Council of Juvenile and Family Court Judges  
Permanency Planning Project  
University of Nevada  
1041 N. Virginia Street, 3rd Floor  
Reno, NV 89557  
(702) 784-6012  
(702) 784-6628 (FAX)

National Governors Association  
444 N. Capitol Street, NW  
Suite 267  
Washington, D.C. 20001-1512  
(202) 624-5300

National League of Cities  
1301 Pennsylvania Ave NW  
Washington, DC 20004  
(202) 626-3000

Parents Anonymous  
520 S. Lafayette Park Place, Suite 316  
Los Angeles, CA 90057  
(213) 388-6685  
213) 388-6896

Parents As Teachers National Center, Inc.  
9374 Olive Blvd.  
St. Louis, MO 63132  
(314) 432-4330

The Pew Charitable Trusts  
One Commerce Square  
2005 Market Street, Suite 1700  
Philadelphia, PA 19103-1700  
(215) 575-9050  
(215) 575-4939 (FAX)

Robert Wood Johnson Foundation  
PO Box 2316  
[Rt. 1; East College Rd.]  
Princeton, NJ 08543-2316  
(609) 452-8701

Youth Law Center  
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(As of December 21, 1993)



### **PART III. EXAMPLES OF COMMUNITY BASED AND STATE PROGRAMS**

*This list represents some of the many family support and family preservation programs that are operating in States and communities across the country. Selection of these programs was based on available information and representation of a variety of programs. Please feel free to send information about additional programs to the Administration on Children, Youth, and Families, 330 C Street, SW Room 2026, Washington, DC 20201.*

*(Permission for reprint was given by the authors of Helping Children By Strengthening Families. A Look at Family Support Programs, and Programs to Strengthen Families.)*

#### **A. Family Support Programs**

##### **1. Center-Based Programs**

Avance, Inc., San Antonio, Texas  
Family Focus Lawndale, Illinois  
The Family Place, Inc., Washington, DC

##### **2. Home Visiting Programs**

Healthy Start, Hawaii  
Home Instruction Program for Preschool Youngsters (HIPPY), Arkansas  
Maternal Infant Health Outreach Worker (MIHOW) Project, Tennessee

##### **3. Respite Care Programs**

Family Support Services of the Bay Area, California  
La Causa, Milwaukee, Wisconsin

##### **4. School-Based Programs**

Families and Schools Together (FAST), Wisconsin  
Family Resource and Youth Service Centers, Kentucky  
PROJECT SCOPE, Missouri

##### **5. State Contracted Programs**

Friends of the Family, Inc, Maryland  
Parents as Teachers (PAT), Missouri  
Parent Education and Support Centers, Connecticut  
Early Childhood Family Education, Minnesota

B. Family Preservation Programs

1. Family Preservation

Idaho  
Oregon's Family Based Service Programs

2. Intensive Family Preservation

Family Preservation Services of Nevada  
Maryland Intensive Family Services

C. Successful Coordination Efforts

1. Walbridge Caring Communities Program, Missouri
2. Family Resource Schools, Colorado
3. Community Family Preservation Networks in Los Angeles County, California

# Avance Educational Programs for Parents and Children

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## Overview

Established in 1973, Avance is one of the first family support and education programs in the U.S. and one of the first comprehensive community-based family support and education programs to target high-risk and Hispanic populations. Through its six centers, all in impoverished neighborhoods, Avance reaches out to create strong families by offering specialized training, social support services, and adult basic and higher education. Avance programs enhance parental knowledge, attitudes, and skills in the growth and development of children (beginning prenatally); strengthen support systems that will alleviate problems and remove obstacles impeding effective parenting; involve parents in the prevention of problems such as learning delays, child abuse and neglect, academic failure, teen pregnancy, and substance abuse; and reduce the likelihood of a child's early exit from school by strengthening the home, school, and child relationship.

## History

Avance is a Spanish word meaning "advancement" or "progress." The Avance agency was founded as a private, not-for-profit, community-based organization. Originally conceptualized at Cornell University and funded by the Zale Foundation, the first Avance program was begun in Dallas, in 1972, and phased out in 1975. Avance-San Antonio, also implemented with Zale funds, was established in 1973. Under the directorship of Gloria G. Rodriguez the program has grown from an initial budget of \$50,000 to over \$2 million; from serving 35 parents to serving over 3,000 individuals; and from one site to six sites. Since its origin as a parent education program focusing primarily on the prevention of academic

failure, Avance has grown to meet the many complex and interrelated needs of families including child-abuse prevention, economic development, and the development of parents' self-esteem.

## Community

The community is predominately composed of low-income Mexican-American families, living in or adjacent to federally-funded housing projects on the south and west sides of San Antonio and Houston. Services are provided at six centers. A 1988 survey of the Avance service area indicated that 37% of the households were headed by single female parents. The average household income for the families surveyed was \$6840; the average educational level was ninth grade.

## Program Components/Services

- The Parent-Child Education Program includes nine-month intensive parent education classes, toymaking, community resource awareness, home visits and home teaching, early childhood education, and transportation.
- The Avance-Hasbro National Family Resource Center provides Avance materials, curricula, training, and field assistance to individuals interested in addressing social and educational problems among high-risk families with young children. This three-year project is funded by Hasbro Children's Foundation.
- Comprehensive Child Development Program (CCDP) is a five-year national demonstration project aimed at providing child development skills to low-income families in which the

mother is pregnant or has children under one year of age. The CCDP provides parenting courses, health and nutrition information, medical services, counseling and crisis intervention, adult literacy training, youth development and job skills training, job placement, housing assistance, and substance-abuse treatment.

- **Fatherhood Services**, a supporting component of the CCDP program is designed to enhance the parental role of the father by providing parenting information, social support, and positive social outlets.
- **Adult Literacy Programs** include basic literacy, GED, and English as a Second Language (ESL) courses, college-level courses, childcare, transportation, advocacy, and referral services.
- **Even Start** is a national demonstration model of a family-centered program focusing on family literacy and parenting education and based in neighborhood elementary schools.
- **The Avance Chronic Neglect Project**, a national demonstration project, provides comprehensive in-home support services to families in need of intensive assistance.
- **Avance Project First**, a national demonstration project focuses on strengthening families through parent education and increasing parent involvement in schools.
- **Avance Research and Evaluation Department**
- **All Avance programs** include transportation and childcare.

## Participants

Avance serves San Antonio's low-income, predominantly Hispanic population. All children served by Avance are considered to be at high-risk. Avance serves single- and two-parent families, and voluntary and court-mandated participants. No fees are charged for the programs.

## Staff

The 117 paid program staff at the centers include 31 professionals, 10 paraprofessionals, and 76 support staff. Several volunteers also serve the programs.

## Outreach

Potential participants are introduced to the program by word-of-mouth and a semi-annual door-to-door outreach campaign. Avance always has a waiting list. Avance makes and accepts referrals from other service providers in the community.

## Evaluation

Avance has conducted an internal, formal evaluation of its Parent-Child Education Program. A pre-test/post-test developed by the organization assessed the program's impact after a nine-month service period. Avance is currently the recipient of a three and one-half year grant from the Carnegie Corporation of New York for a formal research and evaluation study of the Avance Parent-Child Education Program. The general objectives are to conduct an impact study, a process and treatment study, a participant profile study, and a follow-up study.

## Replication

The first Avance-San Antonio program was replicated from the original Avance program in Dallas in 1973. An additional center in San Antonio was opened in 1979, a third in 1982, and a fourth in 1987. In 1988, the Avance Houston Center was established with a grant from Kraft General Foods Corporation. In 1991, a sixth site opened in San Antonio. The Rio Grande Avance program in McAllen, Texas is currently in the process of being implemented.

## Funding

Avance's annual budget is approximately \$2.3 million: 52%, federal government (Department of Health and Human Services, Head Start Bureau, and the Department of Education); 5%, state government, (Department of Human Services); 17%, local government (city of San Antonio and city of Hous-

- ton); 26%, private foundations and corporations (including: The Carnegie Corporation of New York, Hasbro Children's Foundation, Brown Foundation, Harris County Child Protective Services Fund, Kraft/General Foods Fund, Greater Houston Women's Foundation, The Rockwell Fund, Tenneco Corporation, Southwestern Bell, Maxwell House Coffee, First Interstate Corporation, Cooper Industries, Enron Corporation, and Shell Oil). Initial funding was completely foundation-based, but over the past 18 years diversification of support has become necessary.

## Highlights

Avance has been recognized by the Greater San Antonio Mental Health Association as the Outstanding Program of 1985, and by the Greater Houston Chapter for Child Abuse Prevention for the Best Primary Prevention Program of 1986. Avance is one of 10 National Family Literacy Models cited in the Barbara Bush Foundation for Family Literacy book, *First Teachers*. It is one of 24 five-year, \$5 million federal initiatives funded by the Head Start Bureau's Comprehensive Child Development Program. Avance has been featured in numerous newspaper and magazine articles, on ABC's World News Tonight and Good Morning America and as the only U.S. program highlighted in a PBS special, "Creative Solutions to Today's Social Problems."

## Suggestions

Treat the population with dignity and respect. Hire staff from within the community. Provide community-based, comprehensive and sequential services to all family members and transportation and childcare. Remain flexible and open to structural change.

## Publications

*Final Report--Project C.A.N. (Child Abuse and Neglect) Prevent; Avance Project C.A.N. Needs Assessment Survey; Avance Project C.A.N. Parenting Education Project Pre/Post Test; Avance Toymaking Manual (English & Spanish); Avance Evaluation Experience; Avance Educational Programs for Parents and Children: A Historical Perspective of Its Twelve Year Involvement; Minority Families Preventing Child Abuse and Neglect Through Parenting Education; 12 Curricula: Key Concepts in Parenting; The Foundations for Learning; Do Parents Make a Difference?; Growth and Development: An Overview; Safety and Supervision; Infant and Childhood Cleanliness; Nutrition: An Overview; Good Diets/Good Health for Children; Shopping on a Limited Budget; Childhood Illnesses--Parts 1 & 2; Childhood Trauma and First Aid.*

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## Family Focus Lawndale

Another "classic" family resource center, Family Focus Lawndale pulls together many programmatic elements into a comprehensive collection of services for families and children. The center, which is one of a network of family resource centers in the Chicago area that make up Family Focus, Inc., offers drop-in services, discussion groups, educational workshops, life skills classes, social events, and other activities for interested families in this Chicago neighborhood.

Family Focus Lawndale's hallmark is the scale and intensity of its efforts, its exceptional community support and integration into the life of the neighborhood, and its close collaboration with several state-supported programs targeted at special populations. As do most family support centers, Family Focus Lawndale attributes its success to a highly committed, capable, and enthusiastic staff, some of whom are former program participants.

Started in 1983, Family Focus Lawndale originally was a small independent program focused on assisting pregnant and parenting teenagers in the largely black, low-income community, which had a teenage pregnancy rate much higher than the overall rate in Chicago. The center offered tutoring, personal growth and development groups, parent-child interaction groups, and the Minnesota Early Learning Design Curriculum for teenage mothers. In addition, Family Focus Lawndale staff trained young mothers who had been teenage parents to make home visits and conduct small discussion groups for pregnant and parenting teens.

Yvonne Heard, one of the early peer helpers, had a baby just a month or so before graduating from high school. A year later, in her role as a peer helper, she visited other pregnant teenagers once a week, ferrying their homework back and forth and sharing her own experience with pregnancy, labor, and infant care. One young girl told a newspaper reporter she didn't know how she would have weathered her pregnancy without Yvonne's visits. "She made me feel a whole lot better," said Patricia. "She'd bring me my homework, talk to me, and once the baby was born she showed me how to fix a bottle right. She was like a sister through this; there was hardly no one else I could count on."

The teenage mothers also participated in a Young Moms group at the center, which met one afternoon a week to share a meal of spaghetti or tacos and talk about common experiences and hopes for the future. The straight talk and the strong bonds that developed between the teens and their peer helpers motivated many of the new mothers to stay in school. Although about half of the girls at the local high school who gave birth did not return to school, most of those who participated in the Family Focus Lawndale program did.

News about the program spread quickly around the neighborhood, and soon younger siblings and cousins of the participating teenagers wanted a group of their own.



In response, the Family Focus Lawndale staff began offering programs for nonpregnant girls, aimed at preventing early pregnancy by building self-esteem and helping the girls set and carry out personal goals. Next, Family Focus Lawndale found funding to hire a male staff person to run a similar program for young men.

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"Once the baby was born she showed me how to fix a bottle right," said one young participant in the Family Focus Lawndale program, describing her peer helper. "She was like a sister through this; there was hardly no one else I could count on."

Today, Family Focus Lawndale is a large, comprehensive program. It acts as a catalyst to coordinate services for families in the community, working with more than 50 agencies, including social service agencies, hospitals, health centers, churches, and schools.

The center facilitates groups and activities for 350 junior and senior high school students. These primary prevention activities plus the continuing teen parents' program are funded through Parents Too Soon, a statewide pregnancy prevention and teen parent support program financed by the Illinois Ounce of Prevention Fund, a public-private agency.

Family Focus Lawndale is also the home of one of four state-funded pilot programs to improve school readiness for disadvantaged children. Project PIECE (Parents Implementing Education for Child Enrichment) is administered by the state Department of Education and uses home-based parent education programs to provide direct services to families with children from birth to age three. Each participating family receives weekly home visits for child development activities, and parents join discussion groups designed to help them give their children a strong foundation for learning.

In addition to providing these standard Project PIECE components, Family Focus Lawndale offers a supplementary Family Literacy program for its Project PIECE families. While

their children attend Family Focus Lawndale's child care program or, if they are four, a preschool program at the neighboring elementary school, parents attend classes on computer literacy, home economics, parenting skills, and basic academic skills.

Family Focus Lawndale's staff members monitor the children's development and refer them for special services when needed. Staff members also help Project PIECE families identify and receive other social services for which they are eligible, housing assistance being one of the most requested. Family Focus Lawndale itself regularly provides emergency food for families using any of its services.

In 1990, 152 Lawndale families with 213 children participated in Project PIECE and Family Literacy. Most were AFDC families with more than one child. Families are referred by social service agencies or other participants.

Family Focus Lawndale conducts an annual evaluation of families that participate in its Project PIECE program. Results show that after six months in the program, parents' interactions with their children increase, parents give children more emotional and verbal cues on a regular basis, criticize and punish their children less, take their children on more outings, and are more likely to provide appropriate toys and play space.

An active Advisory Council representing community leaders, area residents, service providers, and business leaders supports the center by maintaining strong links between the program and the community. Director Gilda Ferguson says the council is "vital to



Family Focus Lawndale being a real community place." Through its committees on social services, education, health, and employment, the council brings problems facing center participants to the community and acts as a catalyst for community action.

Family Focus Lawndale operates on an annual budget of \$850,000, most of which comes from the state to support the state-funded programs Lawndale runs on top of its basic drop-in services and classes for neighborhood residents. Family Focus Lawndale serves 650 families yearly in center-based programs, with a staff of 35.

Family Focus, Inc. began in 1976 with one center in Evanston, gradually adding programs over the years. All Family Focus centers are drop-in programs, with shared basic assumptions and approaches, but they differ in specifics as they respond to the culture of the families and neighborhoods they serve. Family Focus is committed to the concept that all families deserve a support system, so its programs are located in diverse neighborhoods, including a suburban community, a multi-ethnic and economically diverse community, and low-income areas with predominantly Latino and black populations.

As the parent organization, Family Focus is responsible for the administration, fund raising, and program development of its centers. Family Focus works with center directors to formulate plans and policies, provide on-going staff training, and assist in advocating on behalf of the families it serves.

**Family Focus Lawndale**  
**Jeanette Allen**  
**Director of Program Services**  
**(312) 421-5200**

## The Family Place

The Family Place is family. Every weekday the red brick four-story house in a largely Spanish-speaking community in Washington, D.C., bustles with life and activity. Dozens of pregnant women and parents with young children—many of them recent immigrants—come to the Family Place to find the kind of caring help they probably would have gotten from their extended families back home.

Although the atmosphere is easy and informal, the Family Place is clear about its primary mission: to ensure women get early and regular prenatal care and parenting education, and that their young children get pediatric care. But those are not necessarily the reasons women first come to the Family Place, says Executive Director Maria Elena

### Fostering an Appreciation of Differences

The New Community Family Place in a largely black neighborhood in Washington, D.C., brings needed family support services to that community. Like its parent program, New Community Family Place targets pregnant women and mothers of children younger than three. Parents and their young children may drop in at any time to use the play space and socialize with other families. New Community staff members offer on-site maternity preparation classes, prenatal exercise classes, infant development monitoring, and one-to-one counseling.

Family Place Executive Director Maria Elena Orrego says the new center will function as a demonstration effort to adapt the successful Family Place support program for Latinos to meet the needs of black families. "There are universal needs that every pregnant woman and every parent with young children has. However, the unique cultural and community strengths and values of the neighborhood will shape our programs and strategies," Orrego says. At Christmas, for example, the New Community not only organized a toy-making workshop but also offered families a chance to celebrate their African-American heritage at a Kwanzaa workshop.

"We have the opportunity to build bridges between these two culturally and ethnically diverse communities—communities that are often tragically pitted against each other," says Orrego. "We now have a chance to encourage and support parents in raising their children to appreciate and celebrate both communities' cultural, ethnic, and racial heritage."

**The New Community Family Place**  
1312 8th Street, N.W.  
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Orrego. Women usually come for specific help with a major crisis or for relief from physical and emotional stress. The Family Place serves any woman who is pregnant or has a child younger than three. There are no other eligibility requirements and services are free.

About 80 percent of the families that come to the center are Spanish-speaking, and about 17 percent are black. Because all of the classes and support groups are in Spanish, however, the Family Place offers non-Spanish-speaking families only emergency services, counseling, referrals to other agencies, and follow up. In response to the needs of black families, the Family Place in December 1991 opened a second family support center in a predominantly black neighborhood (see box, page 22).

A friend brought Anita to the Family Place because Anita's husband was drinking and abusing her. Anita had no means of support except her husband, she was six months' pregnant, and had a two-year-old daughter with cerebral palsy. A bilingual intake worker listened to Anita as she explained her family situation. The intake worker emphasized the importance of prenatal care and referred Anita to one of the four prenatal clinics in the area. Anita was informed about the legal rights and options for battered women in the city and was offered support if she decided to leave her home and go to a shelter.

The intake worker explained that the Family Place would provide transportation money if Anita needed it to reach a clinic or shelter, and a long-time participant or a staff member would accompany her if she wished. Before Anita left that day, she agreed to come back the next week to talk more about her daughter and other concerns.

Many of those who come to the Family Place are fearful and isolated from the larger community because of their undocumented status and inability to speak English, so their first visits are usually low-key. They can join other mothers chatting and playing on the floor with their toddlers in the bright first-floor playroom, and they are welcome to stay for a hot lunch, which is served every weekday. Gradually the new mothers develop friendships with other mothers and the staff members.

After Anita had her second interview, she was assigned a family services coordinator, and the two developed a plan to address the aspects of Anita's life that were causing her concern—her pregnancy, her daughter's problems, and her relationship with her husband. Although the Family Place focuses on pregnant women and mothers with children up to the age of three, the program also ensures that other family members are linked with services in the community.

During the next few months, Anita worked with her family services coordinator to enroll her daughter in a program for children with special needs. Anita and her worker explored several options to solve Anita's marital problems, including marital counseling and referring her husband to Alcoholics Anonymous.

Throughout her pregnancy, Anita was troubled. She was frightened that the baby might be damaged, and her marriage was not improving. However, the friendship and counsel she found at Family Place helped her keep her prenatal appointments at the clinic, and she attended the prenatal care classes at Family Place. Her baby was born healthy.

The classes in prenatal care, exercise, and parenting are the heart of the Family Place program. The prenatal care class is offered in six-week cycles, meeting once a week for an hour and a half to discuss topics such as nutrition or preparation for breastfeeding. When women reach the seventh month of pregnancy, they attend a four-week prenatal exercise

class. This approach has ensured a good start in life for babies born to Family Place mothers. Very few babies are born at low birthweight (less than 5.5 pounds), a condition that is associated with a variety of health and development problems. In 1990, 158 babies were born to women assisted by the Family Place. The babies' average weight was more than 7.0 pounds, and only one was born prematurely.

The parenting class also meets once a week for six weeks. Topics of discussion include the emotional and physical development of infants and young children, and discipline. Staff members offer individual guidance sessions to parents who may be at risk of abusing or neglecting their children, and the Bebes Especiales project offers individualized services, including home visits, to families with children with identified disabilities.

Mothers also may attend weekly support group meetings to discuss issues chosen by participants, such as loneliness, adjusting to a foreign environment, and relationships with partners. Literacy classes and classes in English as a second language are offered to help prepare mothers for better paying employment.

Many of the activities and services offered at the Family Place are provided in conjunction with other service providers. For example, a Planned Parenthood staff member comes for half a day every week to help mothers with family planning issues. The Red Cross certifies parents as Red Cross babysitters, the Handicapped Infant Intervention Project provides a child development specialist for developmental screenings on a weekly basis, and a maternal and child health center sends its public health educator one afternoon a week to conduct a prenatal class.

A notable result of the program, says Orrego, is that once families become stable they often help others. Anita is a good example. After her baby was born, she decided to separate from her husband. Family Place helped Anita make arrangements to share an apartment temporarily with another participant. Several months later, when she and her children had found an apartment of their own, Anita, with backup from the Family Place, provided temporary shelter to another participant who needed a safe home during a transition. As a result of Family Place assistance and the generosity of Family Place participants such as Anita, not one of the 45 homeless families that came to the Family Place in 1990 had to go to a city shelter.

The long-term goal of the Family Place is to break the cycle of poverty for children by enabling their parents to overcome the social and economic barriers they face in providing for their children's healthy development. So when it became clear that many Family Place mothers were having difficulty during childbirth at Washington's public hospital because there were no Spanish-speaking personnel in the delivery room, the Family Place staff assisted the mothers in taking their case to the public. According to former program director Joe Citro, the staff prepared a young mother to present the issue to a city-wide health forum. She captivated the audience with her own story, and the publicity that was generated prompted the hospital to hire Spanish-speaking staff members to translate forms and other vital information for patients.

The Family Place started in a church basement in 1981 as a project of the Church of the Saviour in Washington, D.C. It had two professional staff members, was funded primarily by the church and a foundation, and attracted mothers to the program by offering free use of a washing machine. In 1986 the Family Place Board of Directors raised and contributed enough money to purchase a permanent home for the program. In 1990 the staff of 16 served 457 families, with a budget of \$434,000, about 56 percent of

which comes from foundations, 11 percent from individuals, and 8 percent from churches. Government, businesses, and other organizations contribute the remainder.

**The Family Place**

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New Executive Director: Ana Maria Neris

### Ewa Healthy Start Program

Almost three years ago, when Mary was in the hospital for the birth of her ninth child, a staff member from the Ewa Healthy Start Program on Hawaii's island of Oahu suggested she might benefit from participating in the program's home visitor program. There were indications the baby might have been exposed prenatally to drugs, one of Mary's high-school-aged daughters had been sexually abused by her father and by Mary's boyfriend, and the family was in therapy with another agency.

Although Mary agreed to participate, she was resistant and uncooperative for the

first year, and the Ewa worker, fearing for the children's well-being, asked child protective services to get involved with the family.

About that time, a new Ewa worker was assigned to Mary's family. She was a grandmother and the two women bonded very quickly. After several months, Mary told the Ewa program staff that the support worker was the best friend she ever had. With the support worker's encouragement, Mary found a four-bedroom apartment for her family and moved out of her boyfriend's apartment. Mary's baby began improving, and the four-year-old was enrolled in the home-based Head Start program.

Today, says Ewa Program Director Elaine Chu, the family is doing much better. The older children are having few problems in school, and although the baby, now almost three, has some developmental delays, a public health nurse keeps a close eye on his development.

"Mary and her children still have a long way to go," says Chu, "but their progress has been amazing. Mary's attitude about herself has improved—we can see the change in her face. And she is making positive changes in her life."

The Ewa Healthy Start Program at Ewa Beach began in 1985 as a state demonstration program in Hawaii's search for a strategy to prevent juvenile delinquency and other problems resulting from an abusive, disadvantaged childhood. The Ewa program was designed by the Hawaii Family Stress Center at the Kapiolani Medical Center for Women and Children in Honolulu, which already had been using home-visitor services to improve family functioning and reduce the incidence of child abuse for more than a decade.

The Ewa demonstration program was found to be so successful that the state used it as a model for the state-funded Healthy Start/Family Support Services program established in 1988. In 1991 the Family Stress Center and six other private agencies operated a total of 12 community-based home-visitor programs on Oahu and five neighbor islands. The addition of five new sites was planned for 1992.

Participation in Ewa, as in all Healthy Start/Family Support Services programs, is voluntary. Families of newborns are screened for family risk factors such as unstable housing, histories of substance abuse, depression, parents' abuse as a child, late or no prenatal care, less than 12 years of schooling, poverty, and unemployment. Early Identification (EID) Workers, who are trained paraprofessionals, screen and interview new mothers in the hospital. They also screen and interview families referred by physicians, public health nurses, and others. Because the demand for services outstrips the available resources, only families with a substantial number of risk factors may participate.

Each newly participating family receives a weekly visit from an Ewa family support worker. Each of Ewa's eight home visitors works with approximately 25 families at a time. All of the family support workers and EID workers are specially trained members of the community who are able to approach families as concerned neighbors and fellow parents.

Since many families initially are in considerable distress as a result of such problems as unemployment, lack of adequate housing, or substance abuse, the support worker's first task often is to help the family cope with immediate crises. For example, the support worker may help the family obtain housing assistance or enroll in Medicaid or in the WIC nutrition program. The worker also links the family directly with a pediatrician to ensure that children receive regular health care, are screened for developmental delays, and are immunized on schedule. Pediatricians have been oriented to the program and are



notified when a child is enrolled in Healthy Start and when a family still considered to be at-risk stops participating.

In the beginning, the support workers take much of the initiative, but as the family situation stabilizes they encourage parents to become more and more active in monitoring family needs, securing necessary services, and taking responsibility for achieving the goals they set for their families.

## What Businesses and Civic Groups Can Do To Assist Family Support Programs

### What businesses can do:

- Donate services such as taxicab rides to parent meetings, and donate furniture, play equipment, infant care equipment, and office equipment for family support centers.
- Donate space for parent meetings, child care, and family support programs.
- Donate administrative aid and support for program administration. Provide secretarial, bookkeeping, and publishing assistance.
- Donate public relations and fund-raising expertise.
- Arrange workshops with family support staff members for employees with families.
- Recruit volunteers to help with special projects and events.
- Adopt a family support center and build a long-term partnership. Hire participating parents when possible.
- Provide funding to help a community-based agency start a new family support center in an unserved neighborhood.
- Advocate for family support programs at the local and state levels.

### What religious organizations and civic groups can do:

- Donate space for parent meetings, child care, and family support programs.
- Organize volunteers to make toys and baby blankets or assemble packages of necessities for newborns and donate them to a family support program.
- Collect used baby equipment and children's clothing for donation to family support programs.
- Organize fund-raising events for family support programs.
- Assist a family support program with its community outreach.
- Adopt a family support program and establish a long-term partnership.
- Organize volunteers to help with building renovation and maintenance.
- Recruit volunteers to help with special projects and events.
- Encourage members to serve as mentors for families being served by the family support program.
- Sponsor a parent education course at a local school or church in partnership with a family support program.
- Advocate for family support programs at the local and state levels.



As trust is established between the family and the family support worker, the visits begin to focus on the parent-child relationship, child development, and parenting skills, but progress is not always easy. One couple, for example, steadfastly refused to acknowledge that drugs, health problems, unemployment, and family violence were destroying their family and harming their children. Fearing for the children's safety, the Ewa worker called in child protective services, which removed the children from the family.

Very soon, however, the mother called the worker to thank her. She said it wasn't until their children were taken away that she and her husband began to realize what they were doing. As the support worker continued to work with the family, the mother stopped using drugs and the father found a job, went into therapy, and is learning how to manage his anger. The family has been reunited and the children are doing well.

The Ewa program recently hired a child development specialist to work with families of children with special needs. And in some cases, the program's male family support worker also visits a father specifically to talk about his role in the family.

The support workers encourage parents to participate in group activities held each week at the Ewa Center located in a neighborhood shopping center. From time to time, the center also organizes special activities and field trips for families. Frequently these activities provide the family's only social contacts.

Families may participate in Healthy Start/Family Support Services programs until the child is five and enters public school, and about 40 percent of Ewa families participate that long. Family needs and changes are evaluated at regular intervals. As families become stronger, home visits become less frequent—perhaps only once a month or once a quarter.

The Ewa pilot program documented success in preventing child abuse. Among the 241 high-risk families served during the three years of the demonstration program, there were no cases of child abuse and only four cases of neglect. The Ewa staff referred five families to child protective services for intensive assistance, and actual abuse was prevented in every case. In contrast, among families identified as high risk but not served because of inadequate resources, the rate of abuse was three times higher than in the general population.

The Ewa program's annual budget is approximately \$400,000, and the program cost per family is estimated to be \$2,100 per year. The Maternal and Child Health Branch of the state Department of Health provides 98 percent of the funding, with additional support coming from private foundations and local fund-raising events.

The 12 Healthy Start/Family Support Services programs are linked through quarterly meetings and a variety of networking activities. The Hawaii Family Stress Center provides staff training for all of the sites. Home visitors attend an initial five-week training course as well as a five-day session after six months on the job. At monthly in-service meetings, home visitors discuss issues that arise during their family visits and receive more specialized training.

**Ewa Healthy Start Program**  
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**Hawaii Family Stress Center**  
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Suite 1001  
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(808) 947-5700 or 944-9000

### HIPPY (Home Instruction Program for Preschool Youngsters)

Every two weeks in Monticello, Arkansas, in the rural southeast corner of the state, 30 specially trained women each visit 15 mothers of preschoolers and kindergarten-age children living within their respective school districts. Many of these families are very poor and isolated from other families. The home visitors are paraprofessionals from the HIPPY program, designed to boost the overall well-being, school readiness, and eventual school success of four- and five-year-olds. Most of these home visitors are themselves mothers of young children and all are members of the community. They are trained to listen and give support to the families they visit, and to offer information and materials parents can use to encourage their children's healthy development.

During each home visit, the paraprofessionals use the HIPPY curriculum to strengthen the mothers' understanding of child development, parenting techniques, nutrition, and health and safety issues. The home visitors leave an activity packet and a storybook for the mothers to use with their child for 15 minutes each day during the next week. The packets contain materials designed to help mothers stimulate their child's ability to think logically and solve problems. They also include activities that teach such things as new vocabulary words, how to recognize shapes and colors, and how to sort objects by size. The home visitors role play the activities for the mothers.

During the alternating weeks, when the paraprofessionals don't make home visits, participating mothers attend a small group meeting held at their local school. There they review the previous week's lesson and discuss related issues with the HIPPY coordinators and other mothers. HIPPY program coordinators often invite pediatricians, school counselors, child development specialists, kindergarten teachers, and others to come and talk with the mothers. Transportation and child care are provided for mothers who need them to attend.

HIPPY group meetings in rural Arkansas are intended not only to reinforce the material presented during the home visits, but also to offer mothers opportunities to develop new social and interpersonal skills and reduce feelings of isolation. Sometimes, says HIPPY Coordinator Judy Gibson, the discussions at the group meetings become very personal and lead to significant changes.

At one meeting, for example, a school counselor had come to talk with the mothers about the social and emotional needs of children entering kindergarten. That discussion led the mothers to begin talking about their own feelings of inadequacy. One mother, Joan, said she had never hugged any of her five children or told them she loved them.

During the following weeks, Joan, her home visitor, and a HIPPY coordinator talked about Joan's behavior toward her children and her desire to show more affection. Eventually, Joan decided to try to hug each of her children every day. At first, the children were confused and resisted their mother's affection, especially her 10-year-old son, who had been identified as very depressed and was receiving help from other state agencies. But Joan stuck to her promise and slowly the children began to respond. After a while, the four-year-old, who participated in the HIPPY program, began to repeat the same messages of affirmation and appreciation that Joan was learning to use. It became clear that the family atmosphere was changing fundamentally when the little girl began to tell Joan, "I love you, Mommy. You are so special to me."

Now Joan and her family are doing well. Her youngest child is five and enrolled in kindergarten, but Joan stays involved in HIPPY by going over the HIPPY lessons with a four-year-old girl she babysits. Joan also has recruited two other families into the HIPPY program.

In the Monticello area, the three-year-old HIPPY program is sponsored by the Southeast Arkansas Education Service Cooperative, composed of 14 school districts. By joining forces, the school districts are able to share the costs of the program yet keep it rooted in individual communities, offering services through each school district. The staff of three professional coordinators and 30 paraprofessionals serve more than 500 families each year.

The educational cooperative recruits participating families by sending announcements home from school with students; posting announcements in local churches, public buildings, and Laundromats; and sending the paraprofessional staff door-to-door to identify families with four- and five-year-olds. Interested families are asked to commit themselves to two years' participation, including the year before a child goes to kindergarten and the kindergarten year itself. Some families leave the program after one year, often because they leave the area in search of better economic opportunities. However, some mothers stop participating because they believe the school will take over responsibility for their child's progress, so the program is stressing the importance of parents' continued involvement in their children's learning.

The paraprofessionals must be former HIPPY mothers or must know a four- or five-year-old child with whom they can work. Although they don't need a high school diploma or a GED, the paraprofessionals do need to have appropriate reading skills, the ability to listen to and support the families they serve, and the ability to organize activities. The paraprofessionals receive three days of initial training and attend weekly in-service meetings to review the coming week's lesson and watch the coordinators role play the activities. They also attend occasional statewide HIPPY training meetings.

HIPPY was adapted from a program originally developed in Israel for new immigrant families and was brought to the United States in 1984 by the National Council of Jewish Women. There are now 80 local HIPPY programs operating in 23 States. As a result of this growth, in 1992 HIPPY USA was established as a not-for-profit educational corporation in New York City. HIPPY USA supplies training and technical assistance to the national network of local HIPPY programs in the United States. The specific functions of the national office include developing program curriculum, disseminating information, coordinating research and evaluation efforts, and developing regional capacity for training and technical assistance. The State of Arkansas actively promotes the program and there are 30 programs coordinated through the Arkansas HIPPY Training and Technical Assistance Center which is housed at Arkansas Children's Hospital.

Until this year, the Arkansas HIPPY programs were supported primarily by money drawn from the funds allocated to the state under federal Chapter 1 legislation and the Job Training Partnership Act. In 1991, however, the legislature passed the Arkansas Better Chance bill, which, among other things, provided \$2.5 million a year in state money to help support HIPPY.

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### MIHOW (Maternal Infant Health Outreach Worker) Project

Life is hard for families in the Mississippi Delta and Appalachia. Unemployment and poverty are enduring facts of life. The search for employment is likely to separate or uproot families, and health care and social services often are far away.

The MIHOW Project was created in 1982 to serve rural families in this part of the country. Its goals are to improve prenatal and infant care among families that don't fully utilize health clinics, and to help solve the complex problems of the region by enhancing the development of its human resources.

MIHOW is a network of family support programs organized by the Center for Health Services (CHS) at Vanderbilt University in cooperation with the Clinch River Education Center in Abingdon, Virginia. The local sponsoring agencies are rural health clinics, community development agencies, and other community organizations in Tennessee, Kentucky, Virginia, and West Virginia.

The success of each MIHOW program rests in large part on its outreach workers—the natural helpers in the community. These women know about early pregnancy, long-term unemployment, isolation, and feelings of inadequacy and hopelessness, for those realities have been as much a part of their own lives as they are a part of the lives of the families they visit. Yet the outreach workers also hold up an example of strength, determination, and community service.

Even with roots in their communities, the outreach workers have to build trust slowly among the families they serve. "The people in our area don't trust just anybody," one outreach worker told a program evaluator during a 1990 qualitative evaluation of MIHOW. "They have been exploited so much it's hard for them to give their trust at first."

But gradually the outreach workers gain the mothers' confidence. "It was like making a new friend," one mother said during the evaluation. "Someone you could share your feelings and thoughts with, without having to do a lot of explaining." In focus groups

and interviews, mothers reported that they felt less isolated and more in charge of their lives after starting the program, and their relationships with their spouses and children had improved.

Most of the parents who participate in the programs are young; the average age is about 20 at the birth of the MIHOW-targeted child. Two-thirds of the participating mothers are white and one-third are black. Almost half are married and live with their husbands. Most have not completed high school.

The outreach worker typically begins to visit a family while the mother is pregnant and continues until the child is two years old. At some sites home visiting continues until the child is three and eligible for Head Start. At most sites the outreach worker comes monthly, starting before a baby is born and continuing until the baby's first birthday. After that, the visits are every other month. Parents also are invited to attend regular parents' meetings and special activities.

The outreach worker has a curriculum to guide her, but she also responds to each family's unique needs. She may take along a VCR to show a pregnant mother a video on breastfeeding, something that is uncommon in this part of the country. She may take books to read to the children. A mother whose youngest is now three and who therefore doesn't receive frequent visits any longer said, "We miss [the workers' visits]. My kids miss them—the participation—and they always taught them something.... They called them parties and they always educated the kids, too."

Unmarried teenagers who become pregnant frequently are ostracized by disapproving parents, and some mothers are so angry with their daughters they object to visits by the outreach worker. Yet some outreach workers have been able to help families resolve tensions and have given the daughters emotional support while their families adjusted to the new situation. One teenager said, "When [the MIHOW worker] would come by the house my mama would create an awful scene.... My mama would tell her she was wasting her time on me because I was no good and hopeless. One day [the MIHOW worker] talked to my mama by herself, and I heard my mama crying and saying she was scared for me.... After that she was always nice to [the MIHOW worker] and me too."

In addition to providing help with health and childrearing problems, the outreach workers encourage family members to take advantage of other resources in the community, including GED and literacy classes and social services for which they are eligible. One woman told evaluators, "MIHOW made me better able to cope with the system. They have strengthened me a lot." Another pregnant mother told of her difficulty with the Medicaid bureaucracy and how the outreach worker had given her the confidence to "keep getting on them" until she finally got results.

Assessments of MIHOW show that participation leads parents to change their behavior in ways that benefit their children's development. One evaluation based on the Caldwell HOME inventory documented that MIHOW mothers are more emotionally and verbally responsive to their children, provide more appropriate play materials, are more involved in helping their children achieve knowledge and skills that are age-appropriate, are more accepting of their children's behavior, and provide more opportunities for their

The parenting class was helpful, said one mother, because it gave her "insight to understand that children are people too. You give them choices instead of demanding this and demanding that..."



children to interact with a variety of adults. The Caldwell HOME inventory, an assessment of parent-child interaction and home environment based on observation and parent interviews, has been demonstrated to correlate positively with children's later school performance.

In addition, during the 1990 qualitative study of MIHOW, many mothers themselves emphasized how much they had learned about childrearing, both from the home visitors and from parents' groups and meetings. "[The MIHOW program] has helped with my self-confidence," said one mother. "When we talked about how to deal with [her child's] temper tantrums it helped me. I could be a lot calmer about it. I could handle it better." The parenting class was helpful, said another mother, because it gave her "insight to understand that children are people too. You give them choices instead of demanding this and demanding that.... This is kind of hard to put in effect. But it has been planted in there and it does make a difference."

The developers of the MIHOW project hoped that the local programs would become financially self-sufficient and would serve as catalysts for new community activities and services for families. With this goal in mind the outreach workers receive training in fund raising and program planning—and with good results. All of the original five local programs were able to raise enough money from local, state, and private sources to continue operating after the initial start-up funding ran out. Four of these five continued to operate a MIHOW project as of late 1991. Three additional programs are receiving start-up funding.

The Center for Health Services (CHS) and the Clinch River Education Center jointly are responsible for training the outreach workers. They provide both initial and ongoing training in the areas of prenatal health, child development and parenting, nutrition, and home safety. Each MIHOW site has one to four outreach workers and serves between 20 and 80 families.

CHS also continues to work with all of the local projects on program and organizational planning and management, curriculum development, fund raising, and evaluation. Several of the programs have broadened their outreach to cover other health issues such as heart disease and black lung disease. And other MIHOW programs have added toddlers' groups, day care programs, and literacy projects.

#### **MIHOW**

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## FAMILY SUPPORT SERVICES OF THE BAY AREA

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Alameda County

Judy Levin

Contact Person: Lou Fox (510) 261 - 2282

Priority Area: 1.08A Temporary Child Care for Children with Disabilities  
and Chronically Ill Children

## PROJECT SUMMARY DESCRIPTION

RESPIRE CARE FOR SUBSTANCE-EXPOSED AND HIV-INFECTED CHILDREN

The San Francisco Bay Area has witnessed a dramatic increase in the numbers of substance-exposed, HIV-infected infants. Many of these children are placed in foster homes, adoptive homes, or placed with relatives. The care of these challenging children falls upon caregivers who receive few supportive services. Respite gives the caregiver a planned, intermittent break from the twenty-four hour care of children. This need is most frequently cited by these caregivers and their agency case managers. The proposed respite care project will provide in-home and out-of-home respite to these families living in Alameda, Contra Costa, San Francisco and San Mateo Counties. Caregivers will be able to use their annual allotment of respite hours in any blocks of time that fit their needs, from one hour to multiple overnight stays. Respite providers are thoroughly screened and extensively cross-trained to work with these children who might also be developmentally delayed or emotionally disturbed. Providers and the project staff culturally and linguistically represent the population to be served. Cost effective regionalization increases the pool of providers, assuring that all respite requests are filled. The project will be collaborating with a multitude of community based agencies in addition to the referring agencies, which include: Social Service Departments, Oakland Children's Hospital-HIV clinic, adoption agencies, and the Child Care Block Grant Projects. Respite should result in less stressed caregivers, more stable placements for chronically ill children, and enhanced family functioning. It's anticipated that this service will contribute towards recruitment and retention of foster, adoptive, and relative caregiver placements. These projected outcomes will be measured by the project's evaluator, UC Berkeley's Family Welfare Research Group. Project staff and collaborating agencies will produce two manuals generic to all child care providers, and a software package. These deliverables will be widely disseminated.

KEY WORDS: Respite care; Foster care; Adoptive placement; Relative Caregiver; Drug exposed children; Pediatric AIDS; Physically disabled; Social services: Temporary child care; Chronically ill

**Section 5117 b Crisis Nurseries  
(Priority Area 1.26B)**

**Project Abstract**

The applicant for these federal funds is the State of Wisconsin, Department of Health and Social Services. It is the intention upon the receipt of these funds to contract with Milwaukee County under the grant. The Milwaukee County Department of Social Services will contract with LaCausa Day Care Center, a non-profit Hispanic organization, to comply with all established guidelines and provide the enhancement crisis nursery services in collaboration with the existing crisis nursery program as a component of the LaCausa Day Care Center. The crisis nursery program is titled LaCausa Family Center.

This proposal is designed to complement and expand on the existing crisis nursery services through the addition of an in-home based, day care voucher system and comprehensive case management services for children and families up to 30 days. The program combines the 24-hour access and counseling services for those parents in need of treatment for alcohol, drug or psychiatric services. The primary emphasis of the program will be on minorities in six targeted zip code areas in the City of Milwaukee which represent the inner city areas with a predominance of African-American and Hispanic families. The intent of the program is to provide safe, therapeutic care to children of addicted or mentally ill parents. This care combined with follow-up services will assist in the transition to a drug free environment.

The Enhancement Program will employ a staff of five and closely access with the existing crisis nursery program for 24-hour, 7-day a week coverage and referrals. Families are not charged any fee for the services provided, which include child care and counseling services. Foster homes, parents and day care providers will expand the evening and day time care openings for young and older children.

Specialized training and extensive contact by the project staff with the foster parents will form a team to assist with the potential special needs of the children in care. Day care providers will be vouchered to accept the children of parents or caregivers in a day treatment program. The project sites will be located in the neighborhood of one of the target zip codes.

The Enhancement Program will collaborate with the Milwaukee Systems Improvement Plan and Child Abuse Prevention Network as an advocate for additional and comprehensive services in the field of treatment for minority families.

If funded, this project can expand the existing crisis nursery services to longer term stays, increase the ages of the children and build a stronger case management and follow-up component to the current program. The Crisis Nursery Enhancement Program will be located at a separate site, which will be in the heart of one of the targeted zip code areas.

**Key Words:**

African-American  
Hispanics  
Minority Families  
Foster Parents/Placements  
Children  
Parent/Caregiver  
24-hour care  
Training

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# Families and Schools Together

Family Service, Inc.

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*Lynn McDonald, Ph.D., A.C.S.W., Program Director*  
*David Hansey, Program Director*

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## Overview

Families and Schools Together (FAST) is a unique substance-abuse prevention program designed to be easily replicated. In every location, FAST is a collaborative venture between an elementary school, a mental health agency, a substance-abuse prevention agency, and families. It targets high-risk elementary school children using a family-based approach. FAST's four main goals are: (1) to enhance family functioning by strengthening the parent and child relationship and by empowering parents as primary prevention agents for their own children; (2) to prevent the target child from experiencing school failure by improving the child's behavior and performance in school, making parents partners in the educational process, and increasing the family's feeling of affiliation with the school; (3) to prevent substance abuse by the child and the family by increasing knowledge and awareness of alcohol and other drugs and their impact on child development, and by linking families to assessment and treatment services; and (4) to reduce stress experienced by both parents and children in daily situations by developing a support group for parents of at-risk children, linking families to community resources and services, and building the self-esteem of each family member.

## History

Lynn McDonald, of Family Services, Inc., Madison, Wisconsin, conceived the idea for FAST in 1987, and enlisted the help of Lowell Elementary School in Madison's Metropolitan School District and the Prevention and Intervention Center for Alcohol and Other Drug Abuse (PICADA) to design the program model. Two grants were awarded to implement FAST in January 1988; one from the United Way of

Dane County and one from the Wisconsin Department of Health and Human Services, Alcohol and Drug Division. FAST has since expanded from two schools in Madison to almost seventy schools across the state of Wisconsin. The Governor's Commission on Education in the 21st Century formally recommended that by 1996 every elementary school in Wisconsin that wants a FAST program have one. Current adaptation of the FAST program for preschoolers and for middle-schoolers is underway with a five-year grant from the U.S. Office of Substance Abuse Prevention (OSAP).

## Community

The original community served was Madison, Wisconsin, a mid-western, middle-sized city with a population of 190,000. The 70 schools now being served include a wide range of from very rural, farming communities, to very densely populated impoverished ghettos in the Milwaukee metropolitan area, and to Indian reservations and suburban towns. The program has been used in affluent and economically depressed areas, multicultural and homogeneous areas. It has been used with African Americans, Native Americans, Hispanic Americans, Asians and Asian Americans, and white Americans. Since FAST is school-based, the neighborhood of the school determines its community and the school selects its target populations.

## Program Components/Services

- In each community, FAST conducts an aggressive outreach campaign which includes home visits, and incentives such as meals and prizes in order to recruit families for participation in the FAST program.

- The program meets for 8 weeks with 8 to 12 entire families in a large room. Activities include:

- (1) Participating in a structured program based on family therapy and child psychiatry research (e.g. making a family flag, a drawing and talking game, and charades about feelings)
- (2) Viewing and discussing a film or play about a child or an alcoholic in order to address the issue of parental substance-abuse
- (3) Engaging in developmentally appropriate family-based activities which help to change family interaction styles
- (4) Building a parent support group through nondidactic time with no agenda but networking
- (5) Spending one-on-one quality time together

Professionals from many different disciplines attend FAST sessions to become resources for parents.

- Monthly meetings for FAST graduates organized by parents with staff and budget support
- Information about and referral to alcohol and drug resources, including treatment and substance-abuse prevention programs

## Participants

FAST's general target population is at-risk children aged five through nine and their families. Family is defined by living together, being connected, and including all adults having a caretaker role toward the child. The definition is meant to be inclusive.

School staff target specific families. Schools have targeted either all children in a certain classroom or only at-risk children or special needs children. Because of limited funding, most schools have selected children who showed behaviors which were perceived by their teachers as putting them at risk in later years for multiple problems.

FAST originally focused on at-risk children. Their

families were considered hard to reach: 60% had no car; 40%, no phone; 90% were single mothers.

## Staff

Schools generally employ one half-time staff person to serve as a FAST facilitator. Responsibilities for this position include assembling and coordinating a team of school personnel and parents, substance-abuse prevention staff, and a youth worker; training teachers; recruiting and training volunteers; recruiting families by visiting homes; facilitating the eight-week night sessions; and participating in a planning meeting for monthly follow-up. The ideal FAST facilitator has a master's degree in social work, a knowledge of family therapy, and experience in community organization and working with children and families. Former participants who have continued to serve as parent liaisons or volunteer leaders have recently been hired as FAST facilitators. They have the specific FAST experience and knowledge necessary to be effective and they bring a consumer perspective to the facilitator role.

## Outreach

Participation in FAST is voluntary. School staff invite families to join the program; and after a release of information is signed, FAST staff make home visits to actively recruit participants. Eighty percent of families visited attend one FAST session. Of these, eighty percent graduate from the eight-week program. In FAST's early days, over half of those identified by the school refused to let FAST staff visit their home; they were alienated from the school. FAST then began training school personnel and using parent graduates to recruit new participants. The program has become very popular and parents increasingly refer themselves because of word-of-mouth.

## Evaluation

Evaluation is a central part of the rapid expansion of FAST. Family Service made a commitment to collect quantitative results with standardized instruments to demonstrate the impact of this school, community, and family-based prevention program. Parents and teachers fill out forms pre- and post-program. These forms are the Quay Peterson Behavior Problem Checklist and the FACES III (on family dynam-



- ics by Olson). Both of these have shown statistically significant improvements in the child and family after only eight weeks of meetings. Improvements are in self-esteem, attention span, and family closeness.
- In addition, a small study with assignment to a control versus experimental FAST group supported these results.

Consumer satisfaction feedback from parents and children has been extremely positive. Professionals involved also rate the program positively on simple Likert scales.

Long-term follow-up data are now being collected.

## Replication

FAST has been successfully replicated in approximately 70 schools across the state of Wisconsin. In addition, FAST has received over 180 inquiries from across the U.S. in the last six months of 1991.

The success of FAST's replication is believed to result from the replication process and materials which include (1) a 300-page FAST training manual which outlines each step of the program (McDonald, et al. 1990; 1991 revision); (2) a formal, six and one-half day training program spread over four months and including three site visits for coaching and problem-solving; (3) training of local collaborative teams which consist of at minimum one mental health person, one substance-abuse person, one educator, and one consumer parent; (4) consulting and technical assistance for grant-writing to start FAST; (5) a site report and formal evaluation of each replication site.

## Funding

The Madison-based FAST program has an approximate annual budget of \$436,550: 63%, from the federal government (Office of Human Development, Office of Substance Abuse Prevention); 11.6%, state government (Wisconsin Department of Health and Social Services, Office of Alcohol and Other Drug Abuse Prevention); 15%, local government (Madison Public School District and Madison City Budget); 11.4%, private funds, including monies from the United Way and the Madison Community Foundation.

FAST is very fundable in the 1990s. It can be funded by federal alcohol prevention dollars allocated

through every public school or by local branches of the United Way (United Way's national office identified FAST as one of 100 model programs for children and families in the U.S.). Funding can also come from demonstration grants or prevention monies from the Family Support Act. Chapter I money, which every public school receives, has a parent involvement requirement which could fund FAST. Clifton T. Perkins' adult education money for parenting classes has been allocated to FAST. Delinquency prevention dollars could also be directed to FAST.

## Highlights

FAST has been honored with several national awards including (1) U.S. Office of Substance Abuse Prevention (OSAP) Exemplary Program Award, one of ten in the United States (June 1990); (2) American Institute of Research honor for inner-city substance abuse prevention—500 programs were reviewed, 6 received recognition as successful models (March 1991); (3) CSR, subcontracted by the U.S. Office of Human Development, reviewed 65 currently federally funded prevention programs and identified FAST as one of six model prevention programs for high-risk youth (March 1991).

These awards all identified FAST's collaborative teams and the family systems approach as unique, and praised the careful self-evaluation process.

## Suggestions

Prevention is a multifaceted, long-term challenge. FAST reports dramatic attitudinal and behavior changes; however, maintenance of these changes over time needs to be effectively addressed.

## Publications

Brochures; training manuals; and videotapes. In addition, FAST has been described and published in various journals and newsletters: *National Association of Social Work Newsletter* (Washington, D.C., 1989); *American Association of Marriage and Family Therapists Newsletter* (Washington D.C. 1990); *The Prevention Report* (The National Resource Center on Family Based Services, Iowa City, Iowa, 1991); *National Organization of Student Assistance Programs and Professionals* (Boulder, Colorado, 1991); *Social Work and Education* (1991); and *Social Work in Japan* (1991).

## Kentucky Schools:

### Family Resource and Youth Service Centers

Kentucky has responded boldly to the 1989 state Supreme Court ruling requiring an overhaul of the state's school finance system. Instead of narrowly addressing the issue of equity in school financing, the state committed itself to reforming every aspect of Kentucky's public education system to improve the education all students receive.

Not surprisingly, discussions of school reform led policy makers to social and economic issues that go far beyond the classroom. Among other things, the reformers considered ways to help families play a more active role in their children's education. As a result, Kentucky's new education system requires a majority of school districts to operate Family Resource Centers for elementary students and their families, and Youth Service Centers for secondary school students.

When fully functioning, the Family Resource Centers are slated to offer access to parenting education, a home-visitor program, child development training, a preschool program, and other activities that respond to local families' needs, as well as referrals to other community services for families.

The Youth Service Centers will provide access to direct services for teenagers, including employment counseling, training, and placement; drug and alcohol abuse counseling; and family and mental health counseling. Some centers also may offer services to teen parents, including parent education classes and child care. In the 1991-1992 school year, the first year of statewide implementation, many centers are emphasizing identification and coordination of existing services and resources, says Hal Fink in the state Cabinet for Human Resources.

The law mandates centers in every school district in which more than 20 percent of the students qualify for the federal school lunch program. Under this criterion, more than 75 percent of Kentucky's 1,300 schools are eligible for centers. In 1991-1992 a total of 133 family and youth centers serving 232 schools were opened. In many rural areas, the family resource and youth service centers have been combined, with one center serving several schools. Some centers are located in school buildings, while others are located in office buildings, storefront offices, or shopping malls. All centers should be operating by the fall of 1996.

Though mandated by the state, the centers are intended to be local programs that respond to local needs. Each center is run by an advisory board, at least one-third of which must be composed of parents. Local teacher representatives, school officials, and business representatives also sit on each board. Two students must be members of every Youth Service Center board. Each board decides on the mix of services its center will offer beyond the mandated core services. The boards may raise additional income to supplement the average \$70,000 grant each center receives from the state.

The law requires each Family Resource Center to offer PACE (Parent and Child Education) where the program is available. An innovative state program begun in 1986 and offered through the schools, PACE is designed to reduce adult illiteracy and improve the school readiness of young children. For three days a week throughout the school year, participating parents attend literacy workshops in classrooms neighboring the developmental preschools attended by their three- and four-year-olds. During breaks, parents join their children for play and learning activities. After a lunch provided by the school, parents attend discussion groups on such topics as child development, parenting

skills, health, and nutrition, while their children nap. Transportation to and from school is provided.

PACE's aim is to prepare more of Kentucky's citizens for high-skill jobs, improve the state's economy, and end the intergenerational cycle of illiteracy and poverty that plagues much of rural Kentucky. Evaluations of PACE show that participating children arrive at school better prepared to learn and progress at a faster rate than their peers who do not participate. In addition, PACE parents are more involved in their children's education than nonparticipating parents.

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## Program Abstract

**Program Title:** PROJECT SCOPE (School and Court Outreach through Prevention Education)

**Organization Name:** 27th Judicial Circuit-Juvenile Division

**Contact Person:** Rebecca L. Culler

**Title:** Chief Juvenile Officer

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**Annual program cost:** \$35,841.75 (20% match from local funds)

**Year(s) funded by CTF:** One

**Number of people served annually:** 211

**Target Population:** At risk parents and children (K through 6th grade)

**Geographical Service Area:** Bates County

Project SCOPE was designed to reduce the risk of child abuse and neglect by educating at-risk parents, children and teachers through three program components.

One component is to provide in-service training to teachers about at risk issues. Another is to provide in-home services to families regarding parenting, family management, self esteem issues. The third component provides group sessions to parents for assistance in parenting skills and small groups for children to help with self esteem issues and school functioning.

The project is a conjunctive effort of the Juvenile Court, Family Counseling Center of Butler and the Butler School System. Results were positive in that all families remained intact with no abuse hotline complaints; 86% of the children showed improvements in school grades and/or attendance; all parents in the groups demonstrated increased parenting knowledge based on pre/post test scores with an average of 16.26% improvement; groups had a completion rate of 89%; 79% of the children's goals were accomplished during their groups; and 85% of teachers actively participated in the referral process and worked closely with the Project Coordinator.

The parenting class curriculum was developed by Vera Shaffer, therapist, from the Family Counseling Center. Excellent feedback was obtained from teachers and parents. A total of 700 hours of direct service were provided to families and teachers through the three program components.

# Maryland

## Friends of the Family, Inc.

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*Margaret E. Williams, Director*

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### Background

In 1985, Maryland's Department of Human Resources allocated \$300,000 to start four community-based drop-in centers to provide support to adolescent parents and their families. Friends of the Family, was created as an independent entity to administer the centers with state funding, augmented by a \$100,000 grant from the Goldseker and Straus Foundations. By FY 1991, 13 Family Support Centers were providing services to more than 3,000 individuals per year.

### Description of Program

Friends of the Family is a private, not-for-profit organization responsible for the coordination and development of Maryland's Family Support Initiative, a statewide preventive effort to strengthen families with children from birth to age three. Friends of the Family (1) develops education and center-based support services in partnership with the governor, public agencies, communities, and private foundations; (2) advocates programs and policies at the state and national levels to improve services to families with young children; (3) coordinates community-based family support centers throughout the state of Maryland; (4) provides the centers with technical assistance, funding support, staff training, and evaluation. These centers provide the following preventive, comprehensive family support services including:

- Adult education
- Parent support
- Child development assessments and activities
- Programs to prevent early parenthood and keep teens in school

- Counseling, health education,
- Employment programs,
- Referral to other community services.

Friends of the Family, Inc. is also responsible for

- U.S. Health and Human Services Comprehensive Child Development Programs
- Family Start, which works intensively with 120 low-income Baltimore City families during the first five years of a child's life to help the children develop their full potential and to help the parents become economically independent.
- Seminars, workshops, and training on issues pertaining to family matters, early childhood education, and program administration in order to promote professional excellence in family support programs.

### Participants

Friends of the Family develops and coordinates family support programs that serve parents and their children up to three years of age in communities at high risk for the often interrelated problems associated with teen parenting, school drop-out, unemployment, poor health, poverty, and lack of parenting skills. Non-parent adolescents are also targeted for pregnancy prevention programs. Participants represent the ethnic and socio-economic characteristics of the communities where the centers are located. Some are located in inner-city public housing projects, others in small rural towns, and still others draw at-risk participants from a broader,

suburban community. The average age of adult participants is 19.

## Staff

Friends of the Family administrative staff consists of an executive director, deputy director, finance and development directors, a training coordinator, and support staff. The remaining FOF staff provides technical assistance, training, and evaluation for all the community-based programs. Six staff members provide full-time support. All administrative and technical assistance staff have undergraduate or graduate degrees in early childhood, sociology, psychology, or administration.

Center directors and Family Start staff have similar backgrounds. All community-based programs have counselors, childcare workers, community outreach workers, clerical and administrative staff, a van driver, parent aides, and volunteers. Most staff members have prior experience in direct-service, community-based programs.

## Outreach

Outreach is viewed as a responsibility of every staff person. Family Support Center participants hear about the program from a variety of sources: agency referrals; word-of-mouth; direct outreach by staff on the street, in homes and in community organizations; or promotional materials. There are no eligibility requirements for participation in center programs. Family Start participants enter the program through an interview process facilitated by community outreach workers. When recruited, Family Start families must have included a pregnant woman or a child under the age of six months. These families must also meet federal poverty income guidelines.

## Evaluation

The Regional Center for Infants and Young Children conducted an evaluation of Maryland's eight Family Support Centers in August 1988. The purpose of the evaluation was to describe who used these programs, the characteristics of each center,

what services were offered, and the degree to which the participants benefited.

The Ford Foundation has funded the development of a computerized evaluation system for the family support centers which has been operational in all centers since November 1990. Reports are prepared semiannually and contain both subjective and objective program analyses.

The federally funded Family Start project has a separate evaluation component.

## Program Development

The public/private partnership that is the foundation of this initiative continues to evolve. This partnership has grown to include nine foundations, four state agencies, one federal department and numerous community sponsors. Initially, in 1986, four family support centers were established; there are now 12 centers in addition to the Family Start project. Center programs that primarily targeted teen parents now offer programs for a broader range of parents. To promote pregnancy prevention, center programs now include adolescents. The education and training component has grown to meet a demand for professional training greater than originally estimated. FOF's leadership and expertise is now sought on task forces, boards, councils, and policy groups throughout the state and the nation.

## Funding

The annual budget is approximately \$4 million: 70%, public; 30% foundation grants, and corporate and individual donations.

Friends of the Family still depends upon state funding for family support programs and technical assistance staff. Additional funding is provided by private foundations. All state and federal funding is program- or staff-restricted. Some private foundations fund specific grants while others provide unrestricted funds. Individual and corporate support is unrestricted. The base of support has broadened over time to include individual, corporate, public, and foundation support.

## Replication

Friends of the Family's programs are designed to be replicated as part of an effort to reform service delivery to families. In fact, at least 10 jurisdictions have developed programs modeled after FOF programs.

There are several factors to consider before the model can be replicated. The role of the intermediary is crucial to the growth and development of this type of initiative, particularly the partnership component. The intermediary role allows each partner to make a unique contribution and receive credit for it, without sacrificing the integrity of the program. As intermediary, FOF has been able to secure many services for center participants that funding from only one source would not have permitted.

## Legislation

The only legislative action needed to establish this initiative was nonpartisan effort to fund the original four family support centers.

## Lessons Learned

There are three critical variables that are largely responsible for the success of this initiative: (1) maintaining the principles of family support — partnership in decision-making and flexibility—throughout the process. These principles were influential in the developmental stages of the program and are still operating at all levels of implementation. Flexibility permits the incorporation of ideas from all stakeholders. Never say "We have planned it all" because as families change, the program should change as well; (2) establishing a separate entity, in

this case, Friends of the Family, to administer the programs. This allows for flexibility and responsiveness to the needs of families and nourishes the partnership between the public and private sectors. (3) incorporating a strong technical assistance component. Centers, like families, need to be part of a larger network. That is how relationships that support the program are built. And, although it is comparatively easier to obtain funding for a programmatic idea, it is essential to obtain a financial commitment for technical assistance and training.

## Suggestions

Consider the availability of private sector funding needed to complement public funding and provide a balance of support. It is important to provide family services in community-based programs. Programs should emphasize the potential of families to build on strengths to minimize problems. Program development and operations need to fully involve participants and community leaders as equal partners. It is also crucial that program initiators collaborate with other family service providers to maximize the cost-effectiveness of services. Choose staff who understand the philosophy of family support, feel comfortable in this different way of relating to people, and have adequate formal training in infant and toddler development. Build evaluation into the program. Information on outcomes cuts down on wasted energy spent on interventions that don't work.

## Publications

Brochure; video; two-year status report.



## Parents as Teachers: Beginning at the Beginning

### Executive Summary

Parents as Teachers (PAT) is a home-school-community partnership designed to provide all parents of children from before birth to age 3, then on to kindergarten entry, the information and support they need to give their children the best possible start in life. The Parents as Teachers program, which originated in Missouri, is based on the concepts that experiences in the beginning years of a child's life are critical in laying the foundation for school and life success, and that parents, as children's first teachers, are their most influential ones.

PAT offers families regularly scheduled home visits by certified parent educators who provide timely information on the child's development and ways to encourage learning, group meetings with other parents to share experiences and gain new insights, periodic screening of children's development for early detection of problems, and linkage with providers of needed services that are beyond the scope of the program. Independent evaluations have demonstrated strong positive outcomes for children and parents who have participated in Parents as Teachers.

The successful outcomes for children and families through this research-based, cost effective flexible model has led to the growth of Parents as Teachers from 4 pilot sites in Missouri to over 1300 programs in 43 states, Washington, DC, and 4 foreign countries.

### Program Description

#### *Vision*

All parents will be their children's *best* first teachers.

#### *Goals*

- Empower parents to give children the best possible start in life
- Increase parents' feelings of competence and confidence
- Improve parent-child interaction and strengthen family relationships
- Help each child reach his or her full potential
- Increase parents' knowledge of child development and appropriate ways to stimulate children's curiosity, language, social, and motor development
- Increase child's success and parents' involvement in school
- Turn everyday settings into learning opportunities
- Help create a greater sense of family success
- Reduce child abuse

#### *Service delivery*

The component services offered to all families in a Parents as Teachers program are

- Home visits
- Group meetings
- Screening
- Linkages with other agencies

*Home visits.* Parents as Teachers certified parent educators, trained in child development and home visiting, come to each family's home on a regular basis. By far the most popular aspect of PAT, the personal visit allows the parent educator to individualize and personalize the Parents as Teachers program for each family and



child. It provides the opportunity to support parents in taking the child development and child rearing information specific to their own child and using it within their own family. Parents are helped to understand what can be expected from a child at each stage of development. Appropriate parent-child learning activities are also a part of the visit. The number and frequency of visits (weekly, bi-weekly, monthly) depends on the needs and desires of the family (and, of course, funding available to the program). For families who prefer that their personal visit not occur in their home, arrangements are made to meet first in the local school, church, community center, or other mutually agreeable location. After trust has been established, visits are generally moved to the home.

*Group meetings.* Parents have the opportunity to meet regularly with other parents and parent educators to gain new insights and share experiences successes, and common concerns. Some meetings are provided for parent-child activities, such as messy play, make-it and take-it workshops, and story times.

*Screening.* PAT offers periodic screening of overall development, language, hearing, and vision. An annual health screening questionnaire includes updates on immunizations. The goal is to provide early detection of potential problems to prevent difficulties later in school, and to promote parents' attention to health and development.

*Referral Network.* PAT helps families link with special services they may want which are beyond the scope of Parents as Teachers. Parent educators access resource directories maintained by PAT programs, and work personally with other agency professionals.

## **Participants**

### *Target population*

Parents as Teachers was not designed as a targeted program, although it has been successfully implemented with targeted populations as in Head Start and Even Start. The Missouri experience of providing PAT to a broad range of families has shown that need for support and assistance in the parenting role crosses all socioeconomic and educational levels. High-risk families are attracted into a non-targeted program because it does not imply inadequacy on their part or view them as bad parents. Their special needs are met through intensified service.

### *Program participants*

All families with children from birth to kindergarten entry can be eligible for Parents as Teachers, regardless of level of income, education, or age. Participation is completely voluntary for families: they enroll if and when they choose, and can withdraw at will. The intensity of services depends on the needs and desires of the family as well as funding available to the program.

### *How people learn about the program*

Recruitment for the Parents as Teachers program is done on multiple levels. By far the most widespread method is by word of mouth through participating families. Parents value and enjoy this program and are anxious for their friends to have the same benefits. Program-managed recruitment strategies include information (including viewing the *Born to Learn* video) disseminated through hospitals, clinics, and doctors; referrals from social service and health agencies; television and radio publicity; newspaper features and announcements; mass mailings; door-to-door recruitment, posters in shopping centers, endorsements from community groups such as churches and service clubs.

A parent in a drug recovery support group emphatically told other participants, "You should join Parents as Teachers. They teach you how to talk to your child without yelling. They teach you how to get him to do what you want without hitting him. And I never knew that before."

## Community Partnerships

Although delivered by the public schools in Missouri, PAT has been a public-private partnership from the outset. Its widespread support can be attributed to its many benefits. Health care providers see it as improving children's physical well-being. Mental health, social services and corrections view it as preventing and reducing abuse and neglect. Churches endorse it as strengthening family life. Business sees its potential for reducing stress and improving the quality of life for employees. Schools realize the benefits of reducing the need for special and remedial education and of forming a positive relationship with families from early on.

Representatives from multiple agencies and organizations serving families of young children sit on each district's PAT Advisory Committee. They are, therefore, in a position to refer families to the program and to serve as referral sources for parents in need of help that is beyond the scope of the PAT program. With the help of these community advisory committees, school district committees which include PAT participants, and regular program evaluations by staff and participants, PAT programs continually adjust and improve their service delivery to meet the needs of the families in their communities.

### *Service linkages with other agencies, institutions, government*

Service linkages exist between Parents as Teachers programs and numerous other agencies, depending on availability in the local community. Primary linkages are with social service agencies and health agencies, including clinics, doctors, and hospitals. The linkages exist to maximize service opportunities for families without overlap of dollars spent. In addition, this allows families to get the best service from the professionals who are expert in their field, and supports mutual referral of families among agencies.

## Evaluation

The Parents as Teachers program in Missouri has undertaken three formal evaluations. Under contract with the Missouri Department of Elementary and Secondary Education, Research and Training Associates (Overland Park, Kansas) conducted an independent evaluation of the New Parents as Teachers (NPAT) project. The project's effectiveness was determined by a treatment/comparison group design, using posttests of children's abilities and assessments of parents' knowledge and perceptions. Evaluators randomly selected 75 project children from 4 school districts and, from the same communities, 75 comparison children whose parents had not received NPAT services but indicated interest.

### Summary of key findings (1985):

- NPAT children demonstrated advanced intellectual and language development.
- NPAT children demonstrated significantly more aspects of positive social development than did comparison children.
- NPAT parents were more knowledgeable about child-rearing practices and child development than were comparison parents.
- Traditional characteristics of "risk" were not related to a child's development at age 3.
- NPAT staff were successful in identifying and intervening in "at-risk" situations.
- NPAT parents had positive feelings about the program's usefulness.

These findings were further substantiated by a follow-up investigation of NPAT and comparison group children as they completed first grade in 1989.

- NPAT children scored significantly higher than did the comparison group on school-administered standardized measures of reading and math achievement.
- Parents of NPAT children were reported twice as likely as parents of comparison children to be involved in their children's school experiences.

Research & Training Associates, Inc., was also selected to serve as the independent evaluator of the Second



Wave Study of Parents as Teachers. The study investigated child, parent, and parent-child interaction outcomes for different types of families. "Types" of families were defined by a number of traditional characteristics commonly associated with socioeconomic advantage or disadvantage: mother's educational level, one- and two-parent family, minority status and poverty. Four hundred families from 37 diverse school districts were randomly selected for participation in the study.

#### Summary of key findings (1991):

- At age 3, PAT children on the average scored significantly above the national norms on measures of school-related achievement--despite the fact that compared to the state's population, PAT participants were overrepresented on traditional characteristics of risk.
- Parents overwhelmingly preferred a parent education and family support program primarily based on home visits focused on the family's needs. PAT participants expressed a high level of satisfaction with the program.
- Parents in all types of families became significantly more knowledgeable about child development and child-rearing practices.
- Parent-child communication was improved and developmental delays were resolved by the completion of the program for two-thirds of identified families.
- There were only 2 documented cases of child abuse during the entire three years among the 400 families sampled.

"If parents know what to expect beforehand, they are less likely to overreact to difficult situations," reported Linda Smith, a California parent educator.

A follow-up study of this group has been initiated to determine the long-term effects of PAT for children and families.

Positive outcomes from Parents as Teachers program participation are also being shown in studies conducted in other states: Arkansas, conducted by Arkansas River Education Service Cooperative; California, 5 studies conducted by SRI International (including one showing positive outcomes for low-income Hispanic families); Colorado, SRI International; Delaware, University of Delaware; Iowa, Des Moines Independent Community School District Department of Teaching and Learning; Kansas, Kansas Department of Education; New York, Cornell University; Oklahoma, Oklahoma Child Service Demonstration Center; Texas, Timberlawn Psychiatric Research Foundation; Washington, Mulkiteo School District.

Through informal evaluations at the program level parents frequently report appreciating the services of PAT, and feeling more confident and competent in their parenting role.

Describing his parent educator, Missouri parent Rick Ruhmann, reported, "It wasn't like a stranger coming into the house, it was like a friend. We felt real relaxed with her here; she came in and just blended right in. She's a joy to have around."

#### Funding

*Estimated basic budget for year-round program: \$580 per family served*

Assumptions:

Caseload per parent educator: 30 families (fewer if majority need weekly visits)

Parent educator employment status: Part-time, 20 hours per week

Parent educator salary: \$15 per hour

Frequency of visits range from weekly to monthly, depending on needs of family

Agency contributes rent, utilities, telephone, administrative and staff support

Additional start-up cost of \$2000 for materials and \$425 per parent educator for pre-service training and curriculum guide.

## Replication

Successful outcomes for children and families through a research-based, cost effective model has led to the growth of Parents as Teachers from 4 pilot sites in Missouri to over 1300 programs in 43 states, Washington, DC, and 4 foreign countries.

### *Changes in program services*

The basic Parents as Teachers model has been maintained by most PAT programs. But within that model adaptations have been made to meet the needs of individual communities. PAT is a *national* model, but at the same time is a *local* program. PAT fits as a component of larger programs such as Even Start, Head Start, and family resource centers, or it can be the early childhood cornerstone for programs that ultimately grow into a broader array of family support offerings. Flexibility exists, and support is available through the Parents as Teachers National Center to make that flexibility a reality. For example, programs who want to provide weekly home visits have the support of the PAT curriculum *Weekly Lesson Plan Supplement*; programs who focus on teen parents have the support of the PAT curriculum *Teen Parent Supplement*. A special implementation guide is available for PAT in the Child Care Center. A model is available for transitioning fragile infants and their families from the hospital neonatal intensive care unit to home and Parents as Teachers. Technical assistance is available to strengthen programs to meet the needs of their populations in the most effective ways. Networking among programs is encouraged nationally through national conferences and symposiums, regionally through inservice training meetings, through the *Parents as Teachers News*, through the *International Program Directory*, and through informal opportunities for communication.

## Training

The Parents as Teachers National Center, Inc. provides Parents as Teachers (PAT) Program Implementation Institutes at specified locations throughout the U.S. or on site by special arrangement; certification of PAT parent educators; technical assistance; national conferences; curriculum and materials development and adaptation to other agencies and states.

### *Resources.*

The 600-page *Parents as Teachers Program Planning and Implementation Guide* is provided only as part of Parents as Teachers Institute training. It includes information on program organization, home visit plans, group meeting plans, parent educator resources, suggested program recordkeeping and evaluation forms, and parent handouts at both a standard and easy-to-read level. The *Weekly Lesson Plan Supplement* is available to PAT programs at a cost of \$45, and includes weekly home visit plans for families with children from birth to 36 months of age. The *Teen Parent Supplement* is available to PAT programs at a cost of \$30 and includes parent educator resource material, parent handouts, and group meeting plans specifically designed for adolescent parents. Recruitment brochures, posters, videos, and a parent booklet, *Be Your Child's Best First Teacher*, are also available from the Parents as Teachers National Center, Inc. *Parents as Teachers News*, which contains resource articles as well as news, is sent to all certified parent educators.

## Contact for More Information

Parents as Teachers National Center  
Mildred Winter, Executive Director  
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9374 Olive Blvd.  
St. Louis, MO 63132  
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# Connecticut

## State of Connecticut

### Department of Children and Youth Services

170 Sigourney Street, Hartford, CT 06105  
203/566-2149

*Carol LaLiberte, Family School Services Coordinator*

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## Background

In the summer of 1986, the Connecticut Department of Children and Youth Services (DCYS) issued a request for proposals and budgeted \$300,000 to establish ten Parent Education and Support Centers, two per DCYS service region. When the ten programs selected began offering services on January 1, 1987, Connecticut became the first state to provide family support services including parent education to a non-targeted population. Each program was set up to operate in a manner consistent with the guidelines set forth in the RFP, and services were designed according to the J. David Hawkins and Joseph G. Weis Social Development Model of Positive Youth Development—which stresses the relationships between children and their family, school, peers, and community—and the family support movement. There are fifteen family support centers statewide.

## Description of Program

Program guidelines have provided the framework for all of the Parent Education and Support Centers since their inception. All DCYS-funded centers are required to sponsor:

- **Parent Education and Training Services** which are multi-session training programs designed to encourage good family management and communication practices. Programs assist children in curtailing undesirable behaviors and teach parents how to set behavioral limits, how to establish rules, and how to be consistent. Some programs teach parents structured approaches to family problem-solving and decision-making. Many programs have specific

components for dealing with the issue of substance abuse. Curricula are developed or revised so as to be appropriate to targeted populations.

- **Parent Support Services** which are designed to reduce the isolation and stress of parenthood while building confidence in parenting abilities through formal or informal meetings of peers and professionals. Among the support services offered are: parent support groups, drop-in programs, warmlines, individual consultations with families, home visits, parent-child activities, and social and recreational activities for the family.
- **Information and Coordination:** Centers provide parents with referral services that link them to other community services. To effectively provide information, a center must have a clear methodology for identifying and storing information about community programs and a plan for follow-up on referrals. Important referral linkages are in the areas of health care, education, and employment systems. Centers also provide informational programs and services which may include seminars and lectures, resource booklets, newsletters, cable programs, regular newspaper columns, and lending libraries.
- **Technical Assistance, Consultation and Training:** Centers are required to act as resources for professionals and service providers in the community. The goal of these services is to affect organizational policies, practices, and procedures so that they provide additional support to parents and families. Examples of

**activities include in-service training for teachers on how to foster parent and school communication, consultation with employers on how to develop more supportive work policies, and technical assistance to day-care providers or health professionals.**

In addition to providing services in each of these four categories, center services must be accessible; programs are encouraged to collaborate with other agencies to provide services; and parents should be involved in planning, governing, and operating center activities. Also beginning in the FY 90-91, all programs must convene an advisory group whose sole charge is to advise the planning and implementation of the Parent Education and Support Center. At least 51% of the advisory group's members must be parents eligible for center services and representative of the community being served. The other 49% might be representatives from schools, community-based agencies, funding sources, etc.

DCYS provides training and technical assistance to all of the centers, conducts site visit, and reviews quarterly reporting forms to assess the development of each center.

## **Participants**

Centers serve all parents of children ages birth to seventeen with priority given to those parents in the community who are underserved. Selection criteria for participation in center programs is non-valuative and not based on any negative criteria.

Centers are located throughout the state, in urban, suburban, and rural areas.

The agencies that receive funding for Parent Education and Support Centers include youth service bureaus, mental health agencies, a substance abuse treatment agency, and a board of education.

## **Staff**

Each of the parent centers is staffed differently. The majority of centers have full-time coordinators who oversee the centers' operations and provide direct services. Typically, coordinators subcontract with individuals to provide workshops and training

sessions or hire a part-time staff person to facilitate groups.

The majority of center coordinators have graduate degrees. Backgrounds of other staff members include experience in one of the following fields: teaching, nursing, social work, adolescent substance abuse prevention, counseling, or protective services. Most parent center coordinators are parents.

A primary prevention services coordinator at DCYS is responsible for the Parent Education and Support Center initiative. Staff from the centers meet quarterly to exchange resources, share information, and participate in training.

## **Outreach**

Centers conduct their own outreach efforts. Some utilize local cable television stations to advertise activities as well as to provide information on parenting. Local newspapers also feature information on parenting written by center staff. Center coordinators send flyers to other local service providers and post them throughout the community. Social service agencies may refer parents to the program. Large, community-wide recreational events are sponsored by the centers in an attempt to draw parents who might not otherwise be aware of the center. Center coordinators provide informational seminars, training, and technical assistance sessions at schools, workplaces, and elsewhere throughout their communities. Newsletters are distributed throughout the communities where centers are located. A packet of materials is sent to all new parents listed in the birth announcements section of the local newspaper.

## **Evaluation**

In the fall of 1987, an evaluation of the Parent Education and Support Centers began with the University of Southern Maine. The evaluation instruments developed included an enrollment form, demographic survey, and pre- and post- tests. Preliminary results from the University of Southern Maine's three year study of the PESC demonstrate that parents participating in center activities express an increase in confidence with regard to their own

parenting. Parents also reported assigning appropriate consequences to negative behavior after joining the parent center (and a reduction in family conflicts).

## Program Development

Because the Parent Education and Support Centers are designed as primary prevention programs serving general populations, their administrators made efforts to avoid becoming stigmatized by narrowly focusing on services to high priority populations. The end result was that largely middle-income families were taking advantage of center services. With the ever-growing need for parent center services for high-need families, center coordinators have begun to work in conjunction with local providers serving this population, offering services at WIC (Women, Infant & Children) offices, Head Start centers, and housing projects.

## Replication

Ten centers were originally funded in 1986. Currently, there are fifteen parent centers statewide. The three newest programs (called Family Support Centers), which began operating July 1, 1991, differ in program design from the other sites in several significant ways.

First, the Family Support Centers are located in high-need communities. Two of the three centers are located in low-income housing projects. As a result, these programs provide intensive outreach and support services to engage families in center activities. These three centers must also provide comprehensive health and safety education. A variety of health services will be available at these centers. Finally, these three centers are funded at slightly more than twice the level of most of the other Parent Education and Support Centers.

## Legislation

In 1990, legislation was passed maintaining the development of Parent Education and Support Centers within the Department of Children and Youth Services (Public Act No. 90-287, An Act Concerning Family Preservation).

## Funding

In FY 91-92, \$855,822 was allocated to fund the Parent Education and Support Centers from the Community Preventive Services account within DCYS. Some of the centers have also sought and received federal funding, as well as funding from other state departments and foundations, to expand their program capacity.

## Lessons Learned

The demand for quality parenting services continues to grow. However, the challenge facing all the centers is how to effectively provide services to general populations while still attracting at-risk parents to the center.

For many centers beginning their fifth year of operation, another challenge lies in empowering parents to assume greater responsibility and ownership towards the program than they currently are, resulting in true parent-driven programs. In many centers, involved parents are still most often service recipients rather than catalysts for program change.

More funding is needed to maintain effective, responsive centers that provide services addressing the needs of their communities. Parent center coordinators' salaries have begun to outpace the level of state funding (centers have not received an increase in funding since FY 88-89), and therefore, less money is available for overall services. This poses a dilemma with regard to continuity of staff and the quality of service delivery over time.

## Suggestions

Make program guidelines general enough to allow individual centers to tailor specific components to their communities' needs. Attempt to develop a supportive local constituency. Plan for a balanced and controlled process of expansion, and diversify your funding base.

## Publications

Program description packet; brochure; center-produced newsletters and resource booklets.



# Minnesota

## Minnesota Department of Education

9th floor, Capitol Square Building, 550 Cedar Street, St. Paul, Minnesota 55101

*Betty Cooke, Specialist, Early Childhood Family Education*  
*Lois Engstrom, Supervisor, Family and Adult Education*

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### Background

Planning for Minnesota's Early Childhood Family Education program began in 1971. There was a ten-year pilot stage of the project prior to legislation in 1984 that allowed for statewide implementation. ECFE was piloted by the State Department of Education through the Council on Quality Education. Between 1984 and 1991, the program expanded from 34 pilot projects to 380 programs statewide.

### Description of Program

Early Childhood Family Education is a program for all Minnesota families with children between the ages of birth and kindergarten enrollment. It recognizes that families provide the children's first and most important learning environments and that parents are children's first and most significant teachers. The mission of Early Childhood Family Education is to strengthen families and support the ability of all parents to provide the best possible environment for the growth and development of their children.

The three main components of ECFE are:

- Parent education
- Parent-child interaction
- Early childhood education

These components are provided in various formats as the most common type of direct service offered by ECFE programs.

Other components include:

- Special events such as lectures, one-day work-

shops, drop-in activities, gym nights, family events, field trips

- Home visits
- Parents-only series, work-site, prison site, women's shelter
- Parent-child-together series, infant classes
- Toy, book, and learning materials lending library
- Information and referral services

### Participants

ECFE is for *all* Minnesota families with children between the ages of birth and kindergarten enrollment. Expectant parents, grandparents, siblings, foster parents, and others who have substantial family involvement and responsibility for young children are also eligible. Approximately 185,000 children and parents, representing one-third of the eligible population of children, participated in ECFE in 380 school districts during 1990-91. This program involves more young children and their families than any other publicly sponsored early childhood program or service in Minnesota.

### Staff

ECFE is administered by two state-level professional staff and one clerical person. Based on the ECFE Annual Reports for the 1989-90 school year, the following numbers of individuals were employed as either administrative or instructional part-time or full-time licensed staff:

## Administrative Instructional

Part-time licensed	200	1101
Full-time licensed	45	118

In addition, a number of administrative and instructional staff members were working on completing licensure requirements and held some type of provisional or temporary license. Over 900 paraprofessionals were employed in ECFE programs statewide and over 1000 unpaid volunteers provided service in the programs.

All teachers and program coordinators are required to have either a parent education or an early childhood education teaching license. Staff development has been an important part of ECFE and helps maintain program quality and to support new programs.

## Outreach

As the program has grown, extensive outreach strategies have been implemented for contacting eligible families, particularly those who are hardest to reach. Newsletters and program brochures are used in all programs. Personal contact and word-of-mouth are often the most effective means of outreach, especially with hard-to-reach families. Local programs are very creative in using a wide array of outreach techniques designed with the needs of community families in mind.

## Evaluation

Evaluation of ECFE has been a priority since the first six pilot programs began in 1975. Many different methods of evaluation have been used as the program has grown and developed. Most of these evaluations have been formative in nature. In 1986 the Minnesota Department of Education, Division of School Management and Support Services prepared a report to the legislature which summarized previous evaluation efforts and outlined a future evaluation strategy. A statewide committee was established to make recommendations and guide efforts related to program evaluation. Recently the committee adapted the "Five-Tiered Approach to Evaluation" developed by Francine Jacobs and

described in *Evaluating Family Programs* by Weiss and Jacobs (1988) to use in determining statewide evaluation priorities for ECFE. The committee found this framework to be an extremely helpful tool for developing a comprehensive, long-range plan for program evaluation.

A study of parent change after a year of program participation was recently completed. Changes were found in parent knowledge about child development, expectations about their children and themselves as parents, and in behaviors and interactions with their children. Parents also reported development of a strong sense of support from others and observation of increased social skills in their children after program participation.

## Program Development

Implementation of the core program components—parent education, parent-child interaction, and early childhood education—has become more varied as programs adapt service delivery to the needs of the families in their communities. The types of direct service have evolved and been defined as the program has grown and expanded.

## Replication

The program has grown from six pilot programs to programs in 380 school districts that encompass more than 98% of state's birth-to-age-four population.

## Legislation

As of June 1991, there are the three early childhood family education statutes in effect: (1) 121.882 Early Childhood Family Education Programs which describes program establishment, program characteristics, which constitute substantial parent involvement, funding methods, coordination with other agencies, district advisory councils, teachers as staff, and available assistance from the Department of Education. (2) 124.2711 Early Childhood Family Education Aid, which concerns program revenue, and (3) 275.125 Tax Levy, School Districts.



## Funding

In 1984, the legislature adopted a statewide funding formula which provides guaranteed equalized revenue from the combination of a local tax levy and state aid based on a district's population under five years of age.

For school year 1991-2, for a district with a community education program that offers ECFE, the guaranteed maximum ECFE revenue is an amount equal to the product of \$96.50 times the greater of 150 or the number of children in the district under five years of age, as determined by the school census of the previous year.

The formula used to calculate ECFE revenue for school districts is maximum guaranteed revenue (0-4 population x \$96.50) minus maximum levy (.54% x local property tax base) divided by state aid. That is, a district may levy .54% times the adjusted net tax capacity for ECFE, but the amount raised by that levy is limited so as not to exceed the guaranteed maximum ECFE revenue amount. State aid is maximum revenue minus levy.

For the 380 school districts offering ECFE in 1991-2, the formula generated an estimated \$14,620,000 in local levy and \$12,370,000 in state aid for a total of \$26,990,000 statewide. In addition to tax revenues, programs may charge fees and receive funding from other sources.

Direct funding sources include local tax levy; state aid; parent fees; school district contributions in addition to the levy, e.g. collaboration with special education, vocational education, community education; non-school district contribution for services; income from fundraising; and federal, private foundation, and other grant money, if any.

## Lessons Learned/Suggestions

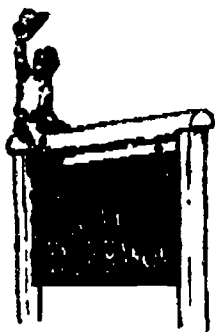
The following list of important lessons learned through the growth and development of Early Childhood Family Education might also serve as suggestions to policymakers in other states who are considering a similar initiative:

- Begin slowly on a small scale and carefully evaluate the process before extending the program statewide.

- Encourage creation of permissive legislation that emphasizes community-based programs with options for local implementation within a clearly stated philosophy.
- Offer choices to parents in program delivery; make classes and other offerings available that integrate all participants as well as those designed for specific groups, e.g., single parents, parents of disabled children, teen parents, etc.
- Assume that all families have strengths and work with them in an atmosphere of mutual respect and responsibility.
- Make the program available to all families with young children to avoid the potential segregation, stigma, and labeling frequently associated with targeted populations.
- Provide strong statewide coordination and leadership.
- Provide for statewide training and evaluation.
- Collaborate with other programs and resources in the community that serve families with young children.
- Form strong relationships with school personnel and policymakers within the K-12 portion of the school system to provide a continuum of learning and parent involvement.

## Publications

Brochure; ten-minute video tape, *Highlights and Evaluation*, provides an overview of several program sites and discusses, via an interview with evaluation consultant Irving Lazar, the benefits of providing this type of program for young children and their parents; (additional videotapes of local programs are available on a free loan basis from the ECFE office.) ECFE was highlighted in *Community Education Journal* (January 1988) and *Empowerment and Family Support Networking Bulletin* (March 1991). A summary of the recently completed study, "Changing Parenting: Minnesota Early Childhood Family Education Parent Outcome Interview Study," is also available upon request from the state ECFE office.



# IDAHO YOUTH RANCH

## FAMILY PRESERVATION SERVICES

4403 E. Locust Lane, Nampa, ID 83686 (208) 467-1750 FAX (208) 466-5242

**PURPOSE** To provide a skill building program designed to keep families together, reunite families that have experienced a placement, improve family functioning and reduce the number of children placed in out-of-home care.

**FACILITY** The FPS office and respite facility is a large home located approximately five miles from downtown Nampa on five acres of land. The facility is licensed for a capacity of 12 children, ages 3-18.

**HISTORY** The IYR Family Preservation Services began in 1992 to offer Idaho communities an alternative to placing children in long term residential programs outside the family's home. FPS was based on the belief that children develop best in their own family and the families are capable of resolving their differences effectively when given adequate help and services.

**STAFF** Short-Term Residential and Crisis Respite Care is staffed with a ratio of one child care worker for each six young people during waking hours. 24 hour awake supervision is provided. Home-Based Services are delivered by teams consisting of a licensed social worker or someone with similar credentials accompanied by a trained family practitioner. Each team has a caseload of no more than five families at any one time. The programs are supervised by persons with graduate level education.

**PROGRAM** FPS consists of Home-Based Services which usually run for two months with 24 hour a day staff availability. The time spent with each family varies according to their need. Most families receive visits from three to five times per week. Additional services offered to these families includes a Short-Term Residential Program geared toward family reunification, Crisis Respite/Shelter Care, and an after school program. After a two week assessment period, a treatment plan is developed with the help of all family members and involved professionals. Help is provided in areas such as behavior management, interpersonal relationships, anger and stress reduction, and school performance. Families are guided in learning to alter dangerous patterns and creating a safe, nurturing home environment with which they can learn to maintain independently. Concrete help is also available to families actively participating in the program.

**REFERRALS** FPS Services are offered to Idaho Health and Welfare Regions 3 and 4. there are opportunities for private families to participate in the program without being referred by H & W.

Kathy Cadwalder  
Family Preservation Services  
Idaho Youth Ranch  
4403 East Locust Lane  
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# **Oregon's Family Based Services Programs**

**Mission: To Strengthen Families and Increase Safety for Children**

Oregon Children's Services Division is in Phase 2 (1993-95) of **Focus for the 90's**, an agency wide transition developed after comprehensive assessment. The #1 commitment is "A greater emphasis on family preservation".

The family preservation programs are driven by an agency commitment to better engage families and communities (the often overlooked resource) in increasing safety for children. Funds are provided to communities. Agency branches (starting with pilots) and programs are reorganizing to this end.

Oregon developed **The Family Unity Model**, a set of beliefs and values about children and families, and a **Family Unity Meeting**, an optional tool for a family and agency to work cooperatively and respectfully to resolve issues of concern, using a family's strengths and resources. The use of this model and other family decision making processes, such as **Family Group Decision Making** (from New Zealand) are being used at intake and other critical times with families.

## **Resources offered by Children's Services Division:**

**Parenting Program:** The provision of Parenting using format and curriculum designed specifically for the child welfare program, with a) Didactic and support group for parents, b) Parent-Child Labs and c) training sessions in home and community settings. (715 families a month)

**Intensive Family Services:** Systemic, strength focused family therapy program for high risk families, short term, average 12 weeks. (1132 families per month)

**FSAT: Family Sexual Abuse Treatment,** services for sexual abuse victims and their families (n. o. spouses and siblings), using educational and group processes.

**Crisis nurseries:** relief nursery model for children 8 weeks to 6 years. (120 families a month)

**Family Resource Workers:** hands on support to families in areas of budgeting, housekeeping, nutrition, parenting, time management. (456 families a month)

**Project Team:** Intensive resource model, using caseworker, health nurse, alcohol/drug abuse staff, working with drug affected families, with a Family Unity Model approach. There are 8 team sites funded around the state.

Jim Nice  
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## FAMILY PRESERVATION SERVICES OF NEVADA

### The Program

Family Preservation Services of Nevada serves families referred by Child Protective Services, Juvenile Probation, and occasionally State of Nevada's Division of Child and Family Services (DCFS). These families are at imminent risk of having a child removed from the home due to abuse, neglect, or status offense/incorrigible behavior. It is a family therapy program jointly funded by federal VOCA grants, DCFS, Clark County Juvenile Court Services and Washoe County Social Services. In Northern Nevada, the Children's Cabinet, Inc., a local private non-profit agency, administers the program and provides additional program support. In Southern Nevada, the program is administered by DCFS.

Family Preservation services are grounded in the philosophy that children's emotional and developmental needs are best met within the context of their families, when these families can be made safe for the children. Thus, the Family Preservation unit of service is the family. The goal is to empower these families to provide adequate, safe care for their children by identifying their strengths, assisting them to find solutions, and supporting self-reliance. Short-term, intensive services are provided in the home, thus reaching families who would be unable or unwilling to access traditional services.

### Referral Guidelines

1) All referrals have as the primary discriminating criteria the imminent risk of out-of-home placement of one or more children in the family. Referring workers are asked to provide documentation that placement will occur without Family Preservation services. Imminent out-of-home placement is defined as the anticipated placement of the child outside the home within 3-5 days of the investigation if no services are provided to the family. When this situation exists, the referring worker refers the family to the Family Preservation program. Services are not meant to replace foster care, but are intended to address the issue of avoiding unnecessary placements.

2) Cases must be referred within 72 hours (preferably within 24 hours) of the incident or family crisis. This is to ensure that Family Preservation services begin while the family is in crisis, allowing the therapists to utilize the crisis as a motivator for change within the family. If referral is not possible during this critical period, it is recommended that referral be deferred until the next crisis or subsequent investigation.

3) The Family Preservation program will accept cases where the child has been removed and placed in protective custody pending further assessment, or in residence at the juvenile probation emergency shelter, as long as the case was referred within the 72 hour period. FP therapists can begin working with the family immediately to assist with the return of the child.

4) For each case referred, there must be at least one adult in the family who requests Family Preservation services. Referring workers are asked to discuss the program with the family before making the referral.

### Services Provided

Family Preservation therapists work with families for up to 90 days, providing intensive family therapy focused on changing the family patterns that led to the abuse/neglect or incorrigible behavior, and subsequently, the risk of out-of-home placement. In addition, to promote family stability, concrete service needs are also addressed.

Therapists work in teams of two, meeting with families at least twice a week for 1-1/2 to 2 hours per visit. Therapists are available on a 7-day a week, 24-hour basis for client emergencies. Services are provided in the home.

Among the services provided are:

1. Family counseling and therapy.
2. Family advocacy.
3. Coordination of services with other agencies.
4. Crisis intervention.
5. Family education, eg. parenting skills, child development information.
6. Family skills, eg. communication enhancement, anger control, effective problem-solving and leisure time planning.
7. Concrete services, eg., accessing resources for food, utilities, rent, medical needs, clothing, etc.

Tom Blitsch  
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Las Vegas, Nevada 89158



## Maryland's Intensive Family Services

### Program Model

Maryland's model employs a two person team. A social worker and a parent aide work together with a family to prevent foster care placement and maintain the child in his/her own home. Services are short-term, with the maximum service duration expected to be 3 months (unless specifically authorized for a longer period of time). Service intensity is achieved by caseloads of one team to a maximum of six families. Flexible purchase of service dollars are budgeted and available for use with families at the average rate of \$600 per family. All staff in the program are state employees; the program does not contract for the basic IFS services with private agencies, although the purchase of service dollars can be used to purchase auxiliary services from these agencies, as well as other "hard services" or goods. (Rent deposits, emergency food supplies, medical needs, etc.)

Maryland's program incorporates a family-centered and home-based philosophy of service. Extensive training is provided to on-going training is necessary in order to assure that this approach is consistently used, because it differs from the orientation that most other caseworkers (for example, protective services or foster care workers) use.

### Role of IFS in the Child Welfare System

IFS is designed to "fit into" the child welfare system after protective services or Family Services but prior to foster care placement. That is, IFS is explicitly conceived as a service to prevent foster care placement for children who have already been identified as needing such placement if IFS is not provided. In this way, the State sought to ensure that this very intensive services would other wise be requiring the State to make foster care expenditures.

The State agency allowed local jurisdictions some flexibility in which component of their local child welfare program could administer IFS (either the protective services unit or the Services to Families with Children unit ). However, all cases served by IFS have to come from Protective Services or Family Services thereby indicating that they are of high risk. Further, these cases must have been officially identified as being at imminent danger of foster care.

### Client Characteristics

Beyond the criterion that families be at risk of foster care, Maryland has established other criteria for suitability of families for IFS. Families must agree to participate in the service voluntarily. Families must not have one of the four following characteristics, which are viewed as generally inappropriate for IFS service; severe retardation of the parents; psychotic parents; severe drug or alcohol abuse, unless the parent agrees to participate in a treatment program for this condition; "chronic" multi-problem families that have been in the system for a long time; families in which a parent has maimed or killed a child previously.

## Preserving the Quality of the Program

In most jurisdictions, Maryland has been able to preserve the unique characteristics of IFS since its inception. That is, the program has maintained its caseload standard of 1:6, and has abided by the three month maximum period of service. The intensity of the model has been preserved, in part, because of the perceived and documented success of the program. In addition, continual training of IFS staff and other staff in the principles and practices of IFS has been necessary to ensure that the program's unique characteristics were valued and preserved.

## Financing

Maryland's IFS program was financed with new state general revenues. These new state funds were justified by the State Agency on the basis of the foster care funds that could be saved as the result of the reduced rate of new foster care placements. The evaluation of the IFS program is still continuing, but preliminary data indicate that foster placement has been averted for the great majority (over 90 percent) of the children served. The key to the evaluation will be the extent to which it can demonstrate that the children served would have been likely to enter foster care if IFS had not been provided.

## Comparison with other Family Preservation Programs

Maryland's model is unusual in several ways. First, it is completely a public sector model. The state believed that it was important to control this service directly, to ensure that it served the targeted families. Just as the state does not contract out for continuing protective services for families, it did not want to have services for these highest risk families provided by other than state staff.

IFS also differs from some other models in that it involves a team approach. Maryland developed this and it seemed a congenial model for the state because of previous successful experience with parent aides. This model seemed to assure intensity in both the professional and paraprofessional services that a family was likely to need.

Finally, Maryland's use of flexible purchase of service dollars is unusual and is believed by state and local administrators, as well as IFS staff, to be a critical part of the program's success. The flexible dollars enable the worker to be immediately responsive to the family, in concrete ways (the funds can be used for so-called "hard" services, such as rent of auxiliary social or health service).

## Evaluation

Maryland's program was recently evaluated by the state research and evaluation agency. Data is available on client outcomes, the nature of the services provided, and the cost of service. A twelve month study was designed to a) standardize the definition and measurement of the population deemed most at risk; b) identify a comparison group of cases not receiving IFS during the study timeframe including assessing level of risk and case disposition; c) follow-up on all case outcomes up to 24 months following the conclusion of the study. Of the



cases referred to IFS (N-90), the placement rate was only 7.5% compared with 33% for families referred to traditional continuing child protective services (N-149). Follow-up one year later indicated that 18% of cases receiving traditional services were in foster care, compared with 3% of the IFS cases. Cost analysis shows significant savings with IFS when it is compared with the incurred expenses of foster care placement. A standard one year "normal" placement for one child in foster care costs \$11,500 whereas service to an entire family in IFS costs \$2,400.

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## **Walbridge Caring Communities Program**

**St. Louis, Mo.**

**Khatib Waheed, Director** (314) 261-8292

The Walbridge Caring Communities Program was founded on the Walbridge Elementary and Community School campus. Walbridge is a state of the art interagency collaborative effort for at-risk youth and their families. By linking Missouri's mental health based intensive family preservation program with case management and community-based support, Walbridge has created a model of family preservation and family support.

### **Goals of the organization**

Walbridge is based on several related principles and assumptions. The first is the importance of the family. Parents are a child's first teacher. Barriers that inhibit the success of children often are linked to the quality of family functioning. Any effort to treat a child's problem must address the family. This essentially is how the African Proverb, "It takes a village to rear a child" is infused pragmatically into Caring Communities philosophy.

In addition, just as the family is critical to the child's well-being, so the community is critical to the family's well-being. The community must be able to sustain support systems adequate to the needs of families who live in them.

Thirdly, many urban school districts and communities lack the resources to address the difficulties faced by families in high risk environments. Serious efforts to address the multiple problems of high risk urban families must include greater partnerships between governments, school districts, foundations and communities.

Finally, because the catchment area is overwhelmingly African-American, Walbridge is committed to the cultural concept of "Afrocentricity." This concept has a dual purpose of (1) recognizing and constructively building upon the cultural difference represented in the African-American community, and (2) allowing the identity, self-respect, and self-love generated through afrocentricity to provide the basis for mutual respect and understanding between races. (Waheed, n.d.)

These principles underpin three specific goals intended to be expressed as outcome measures:

- \* keep children in school and increase their levels of school success
- \* keep children safely in their homes, avoiding unnecessary placements
- \* keep children out of the juvenile justice system

In addition to these goals, which are recognizable social service objectives, Walbridge has a deeper mission, to rebuild a community and all that that implies: the economy, social and health care institutions, and housing. The real goal of Walbridge is to rebuild a stable community.

## Walbridge implementation sequence

Community schools program creates the neighborhood culture requisite to community-based collaboration.

Top state bureaucrats agree to attempt a school-based collaborative. Foundation underwrites project development.

Careful recruitment yields a skilled community leader for directorship (Melaville, et al. 1993).

Director takes personal charge of the implementation process, emphasizes open and ongoing communication between state directors, foundation representatives, Walbridge school principal, and Caring Communities director (Waheed, 1991).

Implementation begins with the site of service delivery. Teachers and other educational services staff involved in developing risk indicators. This creates openness, ownership, and allays fears among school staff. It also helps assure the program reaches the right students and their families.

Director sets staff recruitment and training criteria.

Advisory panel formed. Criteria for board membership: commitment to child and family development, commitment to making systems culturally competent, demonstrated energy directed towards systems change, and a belief in community education. The specific requirements for the advisory panel give it an especially important function in the program's operation.

Interagency team formed. While extremely important in the complex network comprising Walbridge, its role is facilitating, not decision making. It is a feedback mechanism within the program's administrative structure. To an extent, it reverses the flow of authority, allowing the program a significant role in informing the state what needs to be done to remove barriers to program development.

"Conduit agencies" identified. This refers to the process of identifying the contract agencies through which the state funds would reach Walbridge. Selection of these agencies was determined by criteria dominated by the critical need for flexibility -- in job descriptions, in hiring policies, in allowing program director input in decisions, in determining the ceiling on administrative costs.

Community assessment conducted. Twelve individuals, including the community school coordinator and the program director canvassed door to door over a two week period to inform residents about the program and ask for their input. This resulted in community meetings identifying major areas of concern, concerns that ultimately became program components. This aspect of the program structure is critically important. It encourages the program to become rooted within the community, a part of a broader agenda for community development. These less formal aspects of the program structure include anti-drug marches, community-based memorial services for victims of drug or crime related violence, respite nights, monthly family nights for community network building, cultural activities such as dramatic productions.

## **Eligibility requirements**

Every family in the Walbridge catchment area is eligible for participation in the Caring Communities program. The community development activities depend for their success on continually widening the base of support within the community for the caring communities concept. A second feature of the process of determining appropriate referrals for intervention services points to the advantages of the school based location. Children are unintrusively engaged in "the system" through the accepted disciplines of public education. Teacher become front-line staff in the effort to identify the relevant subpopulation. Within this context, risk indicators can be applied to students as a feature of a comprehensive support and preservation strategy.

### **Services**

Services are characterized as prevention and early intervention oriented.

#### **Prevention**

Student assistance -- remedial instruction to improve school performance.

Culturally oriented classroom presentations -- developing identity, discipline and community cohesiveness through Afrocentricity.

Youth development program -- drug free recreation, positive peer support.

Latchkey program -- regular care for children of working parents.

Pre-employment training -- developing job-readiness skills for adults.

Parenting Program -- trains parents in social competencies such as drug abuse prevention, self-esteem building, non-violent conflict resolution.

Respite Night -- overnight alternative child care provided quarterly for parents/care givers needing a break from child rearing responsibilities.

#### **Intervention**

Anti-drug task force -- public information and demonstrating at sites of drug related activities.

Case management services -- home and school-based support and linkages with relevant social services.

Day treatment services -- behavior therapy and interventions for youth having problems adapting socially to the school environment.

Drug and alcohol abuse counseling -- counseling on special issues related to substance abuse for children and adults.

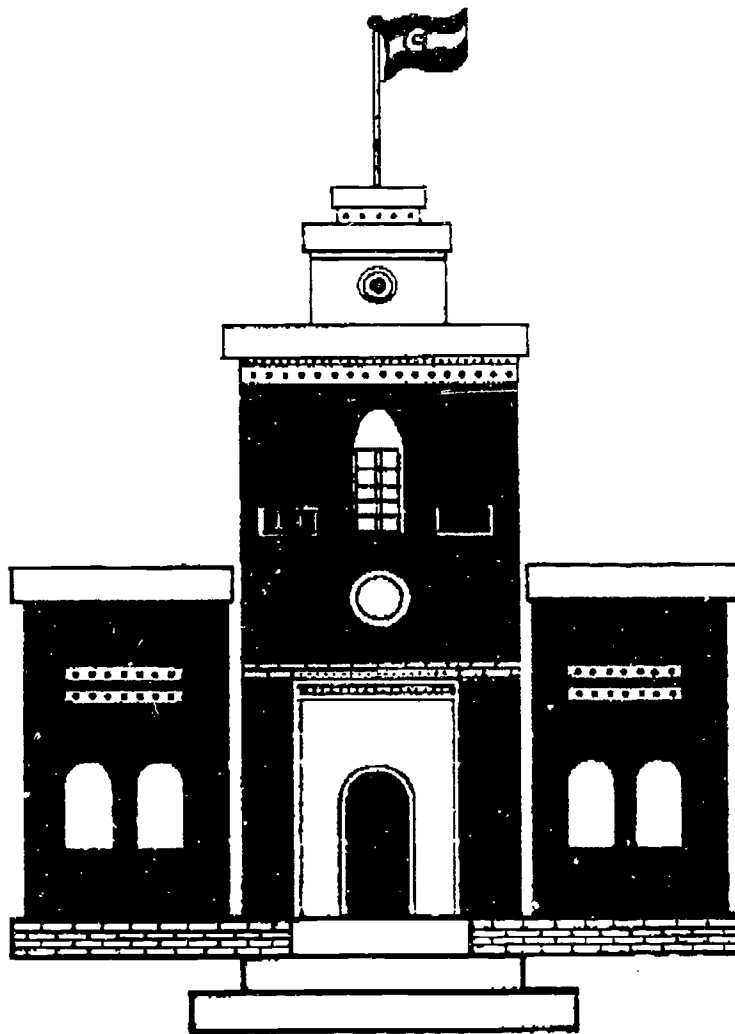
Families First -- 10 week intensive in-home therapy designed as family preservation services for families in crisis, followed by extended (one year) case management services.

## **Funding sources**

Walbridge operates with a budget of approximately \$600,000 provided by the four state departments and the St Louis public schools. The Danforth Foundation has contributed \$250,000 in the three years since the program's start-up (Melaville, et al, 1993).

Creative funding options were required to meet implementation goals for staffing. The identified "conduit agencies," Harris-Stowe College and the City of St. Louis Health and Hospitals Division, would simply pass the money through to Walbridge to satisfy budgetary requirements for spend state dollars. Hopewell, the mental health agency responsible for clinical services is an exception to this. Other funding obstacles included the need to allow money budgeted for reimbursement to be reclassified as start-up funds.

# Family Resource Schools



***"Strengthening the capacity of families  
to support their children's learning***

**In the Denver Public Schools**

# Across the nation...

in big cities and small towns — the efforts of parents, educators, public officials and business people are focused on restructuring our schools so that all students can succeed. While many current education reform efforts concentrate primarily on governance and curriculum issues, there is a growing recognition that schools cannot achieve their academic mission without strengthening and enabling families.

The Family Resource Schools operate from the premise that a child's success in school depends not only on the effectiveness of the traditional school experience, but on the overall health of the child's family and community. Unfortunately, many families and communities are no longer able to provide the essential foundation for effective schooling. This seems to be particularly true in urban areas. For this reason, the focus of the Family Resource Schools is on renewing the school-community link in order to strengthen the capacity of families and communities to support children's learning.

## **Background and Mission of the Family Resource Schools**

The Family Resource Schools project is a unique partnership of the Denver Public Schools, the city of Denver, businesses, community organizations and foundations to enhance the range of programming and activities offered by public schools in inner-city neighborhoods. Planning for the Family Resource Schools project began in the fall of 1989. The mission established for the project is to:

- • • increase the academic achievement of students by removing non-educational barriers to learning
- • • accelerate student learning through additional academic activities
- • • strengthen the capacity of families to support their children's learning and development
- • • rebuild school communities by forging partnerships between schools and the communities they serve.

*"As parents, teachers and principals in communities nationwide tackle school reform, they would do well to draw on the successes of Denver's Family Resource Schools. Such schools will become the learning centers of the future."*

**Elaine Gantz Berman**  
Program Officer,  
The Picon Foundation  
Chair, Family Resource Schools  
Executive Committee



## Core Components of the Family Resource Schools

### Student Achievement and Growth: Before-and after-school programs including:

- Community study halls with volunteer tutors
- Family read-alongs and family math classes
- Swimming lessons
- Guitar classes
- Community garden
- Cultural activities with the Denver Art Museum

### Adult Education and Skill-Building:

- Adult Basic Education (ABE)
- General Equivalency Diploma (GED)
- English as a Second Language (ESL)
- Spanish as a Second Language
- Conflict management
- Employment workshops
- Housing workshops for first-time buyers
- Weight Wise - Health and Nutrition programs

### Parent Education:

- MELD program (Peer support group for young mothers)
- Weekly parent training programs
- Positive-discipline workshops
- Sex education workshops
- Gang prevention workshops

### Family Support Services:

- On-site case management
- Alcohol and drug prevention programs
- Before- and after-school child care
- Child care for all school programs and activities
- Baby sitting co-ops
- Food and clothing banks
- Mental health services
- Women's support groups

### Community and Business Partnerships:

- Public Service Company employees participating in school governance and as volunteer tutors
- King Soopers offering student and parent scholarships
- YMCA providing before-and after school child care
- Community College of Denver providing adult education classes in the schools
- Denver Department of Parks and Recreation providing after-school programs

The project includes seven elementary schools — two in primarily African-American, northeast Denver neighborhoods and five in largely Hispanic neighborhoods in west Denver.

In September 1990, these schools began to set in motion the Family Resource Schools' concept. During the first year, planning committees at the schools — comprised of the principals, teachers, parents and community representatives — conducted a community assessment, hired site coordinators and offered a variety of special programs and activities based on the objectives of the individual schools.

The Family Resource Schools provide the traditional, student-focused, academic support programs, as well as offering non-traditional family-focused programs — such as employment workshops, adult education, parenting classes, peer support groups and tutoring programs that involve parent participation.

In addition, on-site case managers work with individual families on accessing and coordinating services offered by outside agencies to help families achieve self-sufficiency.

All Family Resource Schools have expanded their hours of operation, developed summer programs, offer child care and have increased parent and community involvement.

*"Family Resource Schools address the needs of both students and parents in the school setting. The success that each member of the family achieves brings them closer to being able to compete in the 21st century."*

Patricia Carpio

Executive Director, Community Affairs, Denver Public Schools

*"Schools need to be the framework for providing a true partnership with families, with community members and with business. This project supports the family in its entirety with the goal of ensuring academic success for the students."*

**Denver Mayor  
Wellington Webb**



**Theresa Torres, single mother of three;  
Cheltenham Elementary School.**

"At first, Mr. Romero (the Family Resource School site coordinator) had to push me to come into the school. I was afraid and you could tell in my voice. But each time it became easier and pretty soon my voice didn't shiver.

Helping at Cheltenham has been very fulfilling. It has made a change in me and my kids. I have learned to deal with kids...answering their questions, helping them in school. Before, I would read to my kids and then tell them to go play after one or two stories. Now I know more. Now we read a story and discuss it. It has really helped them in school, but it has also helped me.

Now I am the co-chair of the PTA and will speak out at committee meetings. I'm not afraid to go into school and now when I walk in I feel really good when everyone knows my name and is happy to see me."

**Dr. Evangeline Sena, principal, Greenlee Elementary School.**

"I'll never forget how I met one of our parents. I was called to the lunchroom because the parent had thrown a tray at the lunchroom staff. It took some time, but we found out her anger and frustration was caused by the fact that she could not read.

The woman actually was the grandparent...it's not unusual to find grandparents raising their grandchildren... Anyway, we spent time with her and helped her learn to read. She was also missing her front teeth, so we contacted Friends of Man and got her some dentures.

Now she is working at King Soopers as a sacker. Since she started working we don't see her as much, but she is still involved in some of our programs. It feels good to know we have made the type of difference that will have a positive impact on her granddaughter."

*For information, please contact:*  
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## **Family Resource Schools Executive Committee**

**Elaine Gantz Berman, Chair**  
**The Piton Foundation**

**Katherine Archuleta**  
**Hunt Alternatives Fund**

**Patricia Carpio**  
**Denver Public Schools**

**Diana Flahive**  
**Gove Community School**

**Donna Good**  
**Mayor Wellington Webb's Office**

**Mimi Howard**  
**Governor's Office**

**Tim Sandos**  
represented by **Gloria Leyba**  
**Denver City Councilman**

**Bea Römer**  
**First Lady of Colorado**  
**Chair, First Impressions**

**Alana Smart**  
**Denver Family Opportunity Program**

**David Stalls**  
**Denver Department of Parks  
and Recreation**

**Ruthann Williams**  
**Public Service Company  
of Colorado**

**Barbara Volpe**  
**Public Education Coalition**

During the past two years, the Family  
Resource Schools project has raised over  
\$800,000 from public and private sources.  
Contributors include:

The Anschutz Family Foundation  
The Colorado Trust  
Danforth Foundation  
Mayor Wellington Webb's Office  
Drug Free Schools and Communities, U.S.  
Dept. of Education  
Hunt Alternatives Fund  
PACE Membership Warehouse  
The Piton Foundation  
Public Service Company of Colorado

*Photo courtesy of Rocky Mountain News  
Hal Stoezle*





County of Los Angeles  
Department of  
Children's Services



# FACT SHEET

PAGE 1

## The Family Preservation Approach In Los Angeles County

### KEY PRINCIPLES

- ▶ Community Investment in Strengthening Family Life
- ▶ Coordination of Community Services
- ▶ Intensive Effort to Protect Children in their Home
- ▶ No New Dollars - Reinvestment of Foster Care Funds for Prevention
- ▶ Collaborative Planning and Implementation of Public Social Services

### LOS ANGELES' UNIQUE DEFINITION

Family Preservation is:  
*An integrated, comprehensive approach to strengthening and preserving families who are at risk of or already experiencing problems in family functioning with the goal of assuring the physical, emotional, social, educational, cultural and spiritual development of children in a safe and nurturing environment.*

### GOALS

- ▶ Assure the safety of children
- ▶ Empower families to resolve their own problems
- ▶ Build on family strengths
- ▶ Identify problems early and solve them
- ▶ Involve the community in family support
- ▶ Decrease the need for public resources
- ▶ Break multi-generational dependency upon public services

### SERVICE DELIVERY MODEL

- Community Family Preservation Networks
- ❖ Lead agencies representing the community
  - ❖ Multi-disciplinary case planning
  - ❖ 24-Hour crisis response by private agencies
  - ❖ Community Advisory Councils
  - ❖ Written protocols to linkage services

### OTHER GUIDING PRINCIPLES

- ▶ Communities Prioritized Base On Need
  - Phase 1 - January 1992
  - South Central Los Angeles
  - Compton
  - Long Beach
  - East Los Angeles
  - Echo Park
  - Pacoima
  - 31 Zip Codes reflect 40% of children placed into Foster Care
- ▶ Allows for Varied Intensity of Services Base On Need
  - Children's Social Worker determines service intensity level
  - Level 1            4 In-Home Contacts            \$ 856/Month
  - Level 2            8 In-Home Contacts            \$1,114/Month
  - Level 3            16 In-Home Contacts            \$1,460/Month
- ▶ Provide Time-Limited Services Based On Need
  - 3 to 6 months intensive services, with additional 3 to 6 months for periodic follow-up
- ▶ Target Population for A.B. 546 Dollars
  - ❖ FR Cases ..... 600 Children
  - ❖ Voluntary FM Cases ..... 1,800 Children
  - ❖ Court-involved FM Cases ..... 600 Children
  - ❖ Delinquents/Status Offenders ..... 600 Children



County of Los Angeles  
Department of  
Children's Services

# FACT SHEET

PAGE 2

## The Family Preservation Approach In Los Angeles County

(CONTINUED FROM PAGE 1)

### OTHER GUIDING PRINCIPLES (CONTINUED)

- Comprehensive Range of Services
  - ❖ Direct Purchase
    - ★ In-Home Outreach Counseling
    - ★ Teaching and Demonstrating Homemaker
    - ★ In-Home Emergency Caretakers
    - ★ Individual and Family Counseling
    - ★ Parent Training
    - ★ Mental Health Treatment (Matched with Medi-Cal)
    - ★ Substitute Adult Role Model
    - ★ Transportation
    - ★ Therapeutic Day Treatment (Probation)
    - ★ Flexible Financing Funds
  - ❖ Linkage
    - ★ Substance Abuse Testing and Treatment
    - ★ Housing
    - ★ Employment/Training Support for Parents
    - ★ Income Support
    - ★ Health Care
    - ★ Child Care
    - ★ Special Education
    - ★ Developmental Services
    - ★ Participation in Healthy Start planning

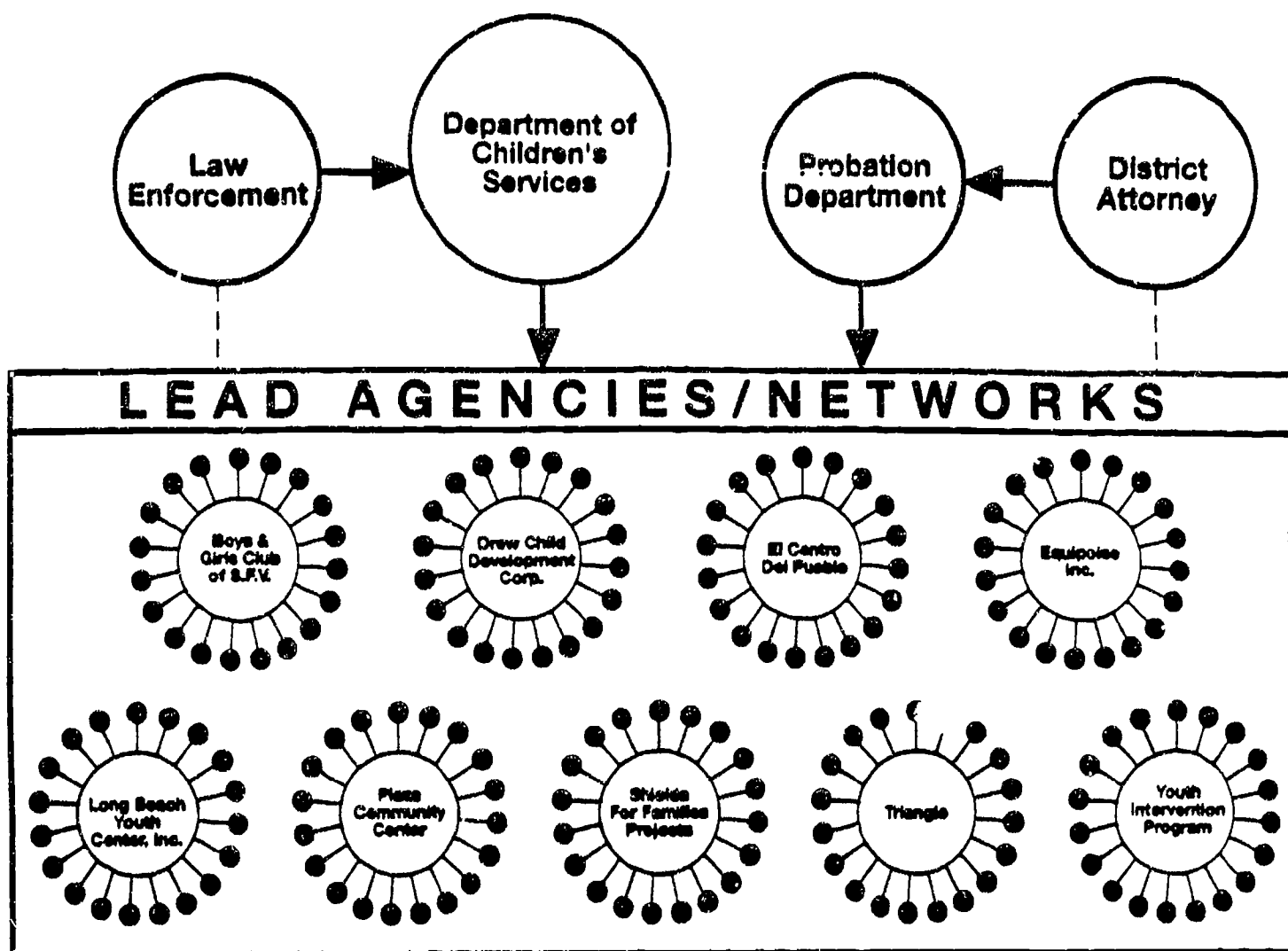
### FINANCING THROUGH EXISTING FOSTER CARE DOLLARS

	Fiscal Year 1991/1992	Fiscal Year 1992/1993
<b>DCS</b>	<b>\$2.2 Million</b>	<b>\$7.6 Million</b>
Public Case Management	\$1.1 Million	\$1.6 Million
Private Sector Contracts	\$1.1 Million	\$6.0 Million
<b>Probation</b>		
Private Sector Contracts	\$0.0 Million	\$1.0 Million

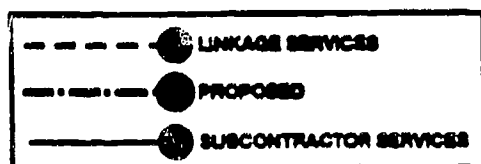
### EVALUATION

- Collaborative approach between
  - ❖ SDSS-OCAP
  - ❖ Walter R. MacDonald & Associates
  - ❖ Commission for Children's Services
  - ❖ DCS/Probation
  - ❖ Community Family Preservation Networks

# COMMUNITY FAMILY PRESERVATION NETWORKS



## COMMUNITY NETWORK MODEL (Services Provided)



#### **PART IV. OFFICES THAT ADMINISTER FEDERAL PROGRAMS FOR CHILDREN AND THEIR FAMILIES**

*The list below represents some of the Federal offices that administer programs for children and their families. The list includes offices within the Departments of Agriculture, Education, Health and Human Services, Housing and Urban Development, Interior, Justice and Labor.*

##### **DEPARTMENT OF AGRICULTURE**

Cooperative Extension System  
14th Street and Independence Ave., SW  
Washington, DC 20013  
(202) 720-3377  
(202) 720-3993 (FAX)

Food and Nutrition  
Child Nutrition Programs  
3101 Park Center Drive  
Alexandria, VA 22302  
(703) 305-2062  
(703) 305-2908 (FAX)

Food Stamp Program  
3101 Park Center Drive  
Alexandria, VA 22302  
(703) 305-2026  
(703) 305-2454 (FAX)

Supplemental Food Program  
3101 Park Center Drive  
Alexandria, VA 22302  
(703) 305-2746  
(703) 305-2420 (FAX)



## DEPARTMENT OF EDUCATION

### Drug Free Schools in Communities

400 Maryland Avenue, SW

Washington, DC 20202

(202) 401-1599

(202) 401-1112 (FAX)

### Education for Homeless Children and Youth

400 Maryland Avenue, SW

Washington, DC 20202

(202) 401-1692

(202) 401-1112 (FAX)

### Even Start

400 Maryland Avenue, SW

Washington, DC 20202

(202) 401-1692

(202) 401-1112 (FAX)

### Indian Education Programs

400 Maryland Avenue, SW

Washington, DC 20202

(202) 401-1887

(202) 401-1112 (FAX)

### Office of Elementary and Secondary Education

400 Maryland Avenue, SW

Washington, DC 20202

(202) 401-0107

(202) 401-1112 (FAX)

### Special Education and Rehabilitative Services

400 Maryland Avenue, SW

Washington, DC 20202

(202) 732-1265

(202) 732-1252 (FAX)

### Vocational and Adult Education

400 Maryland Avenue, SW

Washington, DC 20202

(202) 732-2251

(202) 732-4548 (FAX)

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families:

Administration for Native Americans  
200 Independence Avenue, SW  
Washington, DC 20201  
(202) 690-7776

Administration on Children, Youth and Families  
330 C Street, SW  
Washington, DC 20201  
(202) 205-8347  
(202) 205-9721 (FAX)

Children's Bureau  
Family and Youth Services Bureau  
Head Start Bureau  
National Center on Child Abuse and Neglect  
Division of Program Evaluation

Administration on Developmental Disabilities  
200 Independence Avenue, SW  
Washington, DC 20201  
(202) 690-6590  
(202) 690-6904 (FAX)

Office of Child Support Enforcement  
370 L'Enfant Promenade, SW  
Washington, DC 20447  
(202) 401-9370  
(202) 401-5559 (FAX)

Office of Community Services  
370 L'Enfant Promenade, SW  
Washington, DC 20447  
(202) 401-9333  
(202) 401-4683 (FAX)

Office of Family Assistance  
Job Opportunities and Basic Skills Training (JOBS)  
Aid to Families with Dependent Children (AFDC)  
370 L'Enfant Promenade, SW  
Washington, DC 20447  
(202) 401-9275  
(202) 401-4683 (FAX)

Office of Refugee Resettlement  
370 L'Enfant Promenade, SW  
Washington, DC 20447  
(202) 401-9246  
(202) 401-4683 (FAX)

Public Health Service:

Center for Mental Health Services  
Substance Abuse and Mental Health Services Administration  
5600 Fishers Lane, Room 11C-09  
Rockville, MD 20857  
(301) 443-1333  
(301) 443-0541 (FAX)

Division of Planning and Policy Implementation  
Substance Abuse and Mental Health Services Administration  
5600 Fishers Lane  
Rockville, MD 20857  
(301) 443-1910  
(301) 443-7590 (FAX)

Maternal and Child Health Bureau  
5600 Fishers Lane, Room 18A-27  
Rockville, MD 20857  
(301) 443-2170  
(301) 443-1797 (FAX)

Maternal, Infant, Child and Adolescent Health Services  
5600 Fishers Lane, Room 18A-39  
Rockville, MD 20857  
(301) 443-2250  
(301) 443-1296 (FAX)

National Institute on Alcohol Abuse and Alcoholism  
Alcohol, Drug Abuse, and Mental Health Administration  
5600 Fishers Lane  
Rockville, MD 20857  
(301) 443-0786  
(301) 443-9334 (FAX)

## DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

### Community Planning and Development

451 7th Street, SW  
Washington, DC 20410  
(202) 708-2690  
(202) 708-3336 (FAX)

### Indian Housing

451 7th Street, SW  
Washington, DC 20410  
(202) 708-1015  
(202) 708-0799 (FAX)

### Office of Economic Development

451 7th Street, SW  
Washington, DC 20410  
(202) 708-2290  
(202) 706-7543 (FAX)

### Special Needs Assistance Programs

451 7th Street, SW  
Washington, DC 20410  
(202) 708-1234  
(202) 708-3617 (FAX)

## INTERIOR DEPARTMENT

### Bureau of Indian Affairs:

#### Housing Assistance

1849 C Street, NW  
Washington, DC 20240  
(202) 208-3671  
(202) 268-3086 (FAX)

#### Indian Education Programs

1951 Constitution Ave., NW  
Washington, DC 20245  
(202) 208-6175  
(202) 208-3312 (FAX)

Social Services  
1951 Constitution Ave., NW  
Washington, DC 20245  
(202) 208-2721  
(202) 208-2648 (FAX)

Tribal Services  
1951 Constitution Ave., NW  
Washington, DC 20245  
(202) 208-3463  
(202) 208-2913 (FAX)

#### DEPARTMENT OF JUSTICE

Office of Juvenile Justice and Delinquency Prevention  
633 Indiana Ave., NW  
Washington, DC 20531  
(202) 301-5911  
(202) 514-6382 (FAX)

Office of Victims of Crime  
633 Indiana Ave., NW  
Washington, DC 20531  
(202) 307-5947  
(202) 514-6383 (FAX)

#### DEPARTMENT OF LABOR

Women's Bureau  
200 Constitution Ave., NW  
Washington, DC 20210  
(202) 523-6611  
(202) 523-1529 (FAX)

## **PART V. INFORMATION ON SOME RELATED PROGRAMS**

*The following section provides additional information on three related Federal programs serving children and their families -- Child and Adolescent Service System Program, the Family Unification Program, and the new Empowerment Zones and Enterprise Communities Program. This represents only a few Federal programs that States and communities may want to work with as they implement the new family support and preservation program.*

- o Child and Adolescent Service System Program (CASSP), Center for Mental Health Services, Department of Health and Human Services
- o Family Unification Demonstration Program, Department of Housing and Urban Development
- o Empowerment Zones and Enterprise Communities, Departments of Housing and Urban Development, Agriculture, and Health and Human Services



**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
PUBLIC HEALTH SERVICE**

**SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION**

**CENTER FOR MENTAL HEALTH SERVICES (CMHS)**

**CHILD AND ADOLESCENT SERVICE SYSTEM PROGRAM (CASSP)**

**INFRASTRUCTURE DEVELOPMENT GRANTS**

## **INTRODUCTION**

The Center for Mental Health Services (CMHS) provides grants to States for the purpose of developing the State and community infrastructure needed to provide comprehensive, coordinated, community-based systems of care for children and adolescents with, or at risk of, serious emotional, behavioral, or mental disorders and their families. These grants are offered through the Child, Adolescent, and Family Branch, CMHS.

Child and Adolescent Service System Program (CASSP) Infrastructure Development Grants are intended to support the development, implementation, and evaluation of systems of care in local communities as part of an overall plan of statewide implementation. States at earlier stages of development may undertake necessary planning and strategy development activities, while States with well-defined strategic plans may proceed directly to local level implementation activities.

## **PROGRAM DESCRIPTION**

### **History**

Since 1984, the Federal government has supported the development of more accessible and appropriate services for the population of children and adolescents with or at risk of serious emotional disturbance and their families through the Child and Adolescent Service System Program (CASSP), now organizationally located within the Center for Mental Health Services (CMHS). This program has offered grants to States to: 1) improve interagency cooperation and coordination in providing the full range of services required by this population, 2) enhance the capacity of mental health agencies to respond to the needs of the population, 3) expand the role of families in planning and developing service systems and in the care of their children, and 4) assure that services are provided in a culturally competent manner. First at the State level, and currently at the local level, CASSP has emphasized the development of the infrastructure required for system improvement and for the development of an expanded array of community-based services. Infrastructure development efforts have primarily involved the creation of structures and processes for system management and interagency coordination at State and local levels. The grants described in this Program Narrative continue the CASSP focus on the development of the state-level and community-level infrastructure needed in order to build coordinated systems of care.

The overall goal of CASSP is to assist States and communities to develop comprehensive, community-based systems of care for children and adolescents with, or at risk of, serious emotional, behavioral, or mental disorders and their families. These systems of care emphasize comprehensive and individualized services, services provided within the least restrictive environment, full participation of families, cultural competence, and coordination among all child-serving agencies and programs.

#### **CMHS STAFF CONSULTATION**

CMHS staff are available for telephone consultation concerning proposal development in advance of or during the process of preparing an application. Inquiries concerning technical, methodological, and substantive issues of service projects should be directed to

Gary DeCarolís, Chief,  
Child, Adolescent, and Family Branch  
or

Judith Katz-Leavy, Director,  
Office of Planning and System Development  
Child, Adolescent, and Family Branch  
Division of Demonstration Programs  
Center for Mental Health Services  
Room 11C-09  
5600 Fishers Lane  
Rockville, MD 20857  
(301) 443-1333

## **ADDITIONAL CHILD MENTAL HEALTH RESOURCES**

The Center for Mental Health Services supports, through Interagency Agreements with the National Institute on Disability and Rehabilitation Research and the Maternal and Child Health Bureau, the following Centers which disseminate information and provide technical assistance to the field.

Research and Training Center on Children's Mental Health  
Robert Friedman, Ph.D., Director  
Florida Mental Health Institute  
University of South Florida  
13301 Bruce B. Downs Blvd.  
Tampa, Florida 33612-3899  
(813) 974-4657

The Florida Center focuses on epidemiological and service system research, including studies related to the organization and financing of community-based services.

Research and Training Center on Family Support  
and Children's Mental Health  
Barbara Friesen, Ph.D., Director  
Portland State University  
P.O. Box 751  
Portland, Oregon 97207-0751  
(503) 725-4040

The Oregon Center conducts research and training activities focusing on family support issues, family-professional collaboration, cultural competence, and enhancing the training of professionals to provide community-based services.

CASSP Technical Assistance Center  
Sybil Goldman, M.S.W., Associate Director  
Georgetown University Child Development Center  
2233 Wisconsin Avenue, N.W.  
Washington, D.C. 20007  
(202) 338-1831

The CASSP Technical Assistance Center undertakes studies and develops issue briefs and monographs on topics concerning children and adolescents with serious emotional disturbances. Areas of emphasis include the development of systems of care for children

Tu. Jay  
July 6, 1993

Department of  
Housing and Urban  
Development

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## Part IV

# Department of Housing and Urban Development

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Office of the Assistant Secretary for  
Public and Indian Housing

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Notice of Fund Availability (NOFA) for  
Fiscal Year 1993, and Program Guidelines  
for the Family Unification Demonstration  
Programs; Notice

# DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

Office of the Assistant Secretary for Public and Indian Housing

[Docket No. N-93-3634; FR 3381-N-01]

## Notice of Fund Availability (NOFA) for Fiscal Year 1993, and Notice of Program Guidelines for the Family Unification Demonstration Program

**AGENCY:** Office of the Assistant Secretary for Public and Indian Housing, HUD.

**ACTION:** Notice of fund availability. (NOFA) for Fiscal Year (FY) 1993; and notice of program guidelines for the Family Unification Demonstration Program.

**SUMMARY:** This notice announces the availability of FY 1993 budget authority for a national competition to award funding for section 8 rental certificates under the Family Unification Demonstration Program, and also sets forth program guidelines for this demonstration program. This Notice invites public housing agencies (PHAs) and Indian Housing Authorities (IHAs), herein referred to as housing agencies (HAs), to submit applications for housing assistance funds. The purpose of the Family Unification Demonstration Program is to test the effectiveness of promoting family unification by providing housing assistance to families for whom the lack of adequate housing is a primary factor in the separation, or imminent separation, of children from their families.

Participation in the Family Unification Demonstration Program for Fiscal Year 1992 was limited, under the VA, HUD-Independent Agencies Appropriations Act for FY 1992, to PHAs in the following 11 States: California, Florida, Maryland, Massachusetts, Michigan, Missouri, New Jersey, New York, Ohio, Pennsylvania, and Texas. As provided by the Senate Committee Report to the VA, HUD Independent Agencies Appropriations Act of 1993, HUD has selected the following five additional States to participate in the FY 1993 Family Unification Demonstration Program: Georgia, Illinois, Minnesota, North Carolina and Virginia. The selection of these five States was based on the caseload of families with children in foster care within these States. The information concerning families with children in foster care was provided to HUD by the Administration for Children and Families at the U.S. Department of Health and Human Services (HHS).

Accordingly, HAs in the following States are invited by this notice to submit applications for rental certificates under this demonstration program: California, Florida, Georgia, Illinois, Maryland, Massachusetts, Michigan, Missouri, Minnesota, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Texas, and Virginia.

This NOFA contains information for HAs in the 16 States listed above regarding the allocation of rental certificate budget authority, the application process, including the application requirements and the deadline for filing applications, the selection criteria and the selection process.

**DATE:** The due date for submission of applications in response to this NOFA is August 20, 1993. Application forms may be obtained from the local HUD Field Office/Indian Programs Office. Applications must be received in the local HUD Field Office/Indian Programs Office on the due date by 3:00 p.m. local time. The local Field Offices are the official place of receipt for all applications. At the time of, or immediately following, the submission of the application to the Field Office, the HA also must submit a copy of the application for funding under this NOFA to the following address: U.S. Department of Housing and Urban Development, Mr. Gerald J. Benoit, Director, Operations Branch, Rental Assistance Division, room 4220, 451 Seventh Street, SW., Washington, DC 20410.

The above-stated application deadline for submission of completed applications to the Field Offices/Indian Programs Offices is firm as to date and hour. In the interest of fairness to all competing HAs, the Department will treat as ineligible for consideration any application that is not received before the application deadline. Applicants should take this practice into account and make early submission of their materials to avoid any risk of loss of eligibility brought about by unanticipated delays or other delivery-related problem(s). HUD will not accept applications sent via facsimile (FAX) transmission.

**FOR FURTHER INFORMATION CONTACT:** Gerald J. Benoit, Director, Operations Branch, Rental Assistance Division, Office of Assisted Housing, Department of Housing and Urban Development, 451 Seventh Street, SW., Washington, DC 20410-8000, telephone number (202) 708-0477. Hearing or speech-impaired individuals may call HUD's TDD number (202) 708-4594. (These telephone numbers are not toll-free).

## SUPPLEMENTARY INFORMATION:

### Paperwork Reduction Act Statement

The information collection requirements contained in this notice have been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1980. OMB has approved the section 8 information collection requirements under the assigned control number 2577-0123.

### I. Purpose and Substantive Description

#### (A) Authority

The Family Unification Demonstration Program is authorized by section 8(x) of the U.S. Housing Act of 1937, as added by section 553 of the National Affordable Housing Act (Pub. L. 101-625, approved November 28, 1990) (42 U.S.C. 1437f(x)); the VA, HUD-Independent Agencies Appropriations Act of 1992 (Pub. L. 102-139, approved October 28, 1991) (HUD Appropriations Act of 1992), and the VA, HUD-Independent Agencies Act of 1992 (Pub. L. 102-389, approved October 6, 1992) (Appropriations Act of 1993). The regulations governing the section 8 rental certificate program are codified at 24 CFR part 882.

#### (B) Background

The Family Unification Program is a demonstration program under which section 8 housing assistance is provided to families for whom the lack of adequate housing is a primary factor which would result in:

- (1) the imminent placement of the family's child, or children, in out-of-home care, or
- (2) the delay in the discharge of the child, or children, to the family from out-of-home care.

The purpose of the Family Unification Demonstration Program is to test the effectiveness of promoting family unification by providing housing assistance to families for whom the lack of adequate housing is a primary factor in the separation, or the threat of imminent separation, of children from their families. (Lack of adequate housing is defined in Section II(A) of this NOFA.)

Certificates awarded under the Family Unification Demonstration Program are to be administered by HAs under HUD's current regulations for the section 8 rental certificate program (24 CFR part 882). The HA may issue a rental voucher to a family selected for participation in the Family Unification Program if the family requests a rental voucher and the HA has one available. In accordance with the Senate Committee Report to the HUD



Appropriations Act for 1993, the demonstration program funding available in FY 1993 is provided for use in 16 States. These 16 States are identified in the "Summary" and in Section II(D) of this NOFA.

#### (C) Allocation Amounts

Of the amounts made available by the HUD-Appropriations Act for FY 1993, up to \$75 million of budget authority for the section 8 rental certificate program is earmarked for the Family Unification Demonstration Program. This amount will support approximately 2,200 section 8 rental certificates. Each HA may apply for funding for a maximum of 100 units. The minimum funding amount is for 25 units. Any HA that is unwilling to accept less than the number of units for which it applies must state this in its cover letter to its application, and must state the minimum number it is willing to accept.

The amounts allocated under this NOFA will be awarded under a national competition based on demonstrated need for such assistance. The Family Unification Demonstration Program is exempt from section 213(d) of the Housing and Community Development Act of 1974 (which requires that funds be allocated on a fair share basis), and from 24 CFR part 791, subpart D, the HUD regulation implementing section 213(d).

#### (D) Eligibility

HAs in the following 16 States are invited by this notice to submit applications for rental certificates under this demonstration program: California, Florida, Georgia, Illinois, Maryland, Massachusetts, Michigan, Missouri, Minnesota, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Texas, and Virginia.

#### (E) Family Self-Sufficiency Program

Section 23 of the U.S. Housing Act of 1937, which established the Family Self-Sufficiency (FSS) Program, was amended by section 106 of the Housing and Community Development Act of 1992 and now requires that all PHAs receiving additional rental vouchers or certificates in FY 1993 must establish a local FSS program. For IHAs, section 106(j) made participation in the FSS program optional for FY 1993 and all future fiscal years. The program guidelines for the FSS program were published in the Federal Register on September 30, 1991 (56 FR 49592). The interim and final rules for the FSS program were published in the Federal Register on May 27, 1993, at 58 FR 30858 and 58 FR 30908, respectively. (The FSS final rule simply adopts the

FSS interim rule as the FSS final regulations.) Unless specifically excepted by HUD, any rental voucher or rental certificate funding reserved in FY 93 will be used to establish the minimum size of a PHA's FSS program.

If a PHA received an incentive award for the FSS program in response to the NOFA published in the Federal Register on September 30, 1991 (56 FR 49612) and amended on January 3, 1992 (57 FR 312), the number of new units received in FY 93 will be added to the incentive awards received in FY 92 and this number will be the minimum size of the PHA's FSS program.

## II. Application Process

### (A) Program Guidelines

(1) Definitions: For purposes of the Family Unification Demonstration Program:

(a) "Family Unification eligible family" means a family:

(i) which the public child welfare agency has certified is a family for whom the lack of adequate housing is a primary factor in the imminent placement of the family's child, or children, in out-of-home care, or in the delay of discharge of a child, or children, to the family from out-of-home care; and

(ii) which the HA has determined is eligible for section 8 rental assistance.

(b) "Lack of adequate housing" means a situation in which a family:

(i) is living in substandard housing or homeless, as defined in 24 CFR 882.219(f); or

(ii) is, or will be, involuntarily displaced from a housing unit because of actual or threatened violence against a family member under the circumstances described in 24 CFR 882.219(d)(2).

(c) Public child welfare agency (PCWA) means the public agency that is responsible under applicable State or Tribal law for determining that a child is at imminent risk of placement in out-of-home care or that a child in out-of-home care under the supervision of the public agency may be returned to his or her family.

(2) HA Responsibilities. HAs must:

(a) Send a partial listing of the names of families on the section 8 waiting list to the PCWA to determine if the families meet the Family Unification eligibility requirements described in Section II(A) of this NOFA. The HA will continue to send a list of family names to the PCWA until the number of families is equal to the number of rental certificates provided to the HA under the Family Unification Program. Families must be referred to the PCWA based on their

positions on the section 8 waiting list. Families will be selected for participation after the PCWA determines that the family meets the Family Unification eligibility requirements, and based on their positions on the section 8 waiting list.

(b) Determine if families referred by the PCWA are eligible for section 8 assistance, and place eligible families on the section 8 waiting list based on the date of the families' applications and any preferences for which the families qualify;

(c) Amend the administrative plan and equal opportunity housing plan to provide for rental assistance to Family Unification eligible families in a number equal to the rental certificates provided by HUD for this purpose, and provide for the opening of closed waiting lists to add applicants when necessary;

(d) Administer the rental assistance in accordance with applicable program regulations and requirements; and

(e) Assure the quality of the evaluation that HUD intends to conduct on the Family Unification Demonstration Program, and submit with the application a certification that the HA will cooperate with and provide requested data to the HUD office responsible for program evaluation.

The HA must review its waiting list to determine if there are any families already on its waiting list (including families in the PCWA caseload) who may be eligible for the Family Unification program. A family must be certified by the PCWA as a family for whom the lack of adequate housing is a primary factor in the imminent placement of the family's child, or children, in out-of-home care, or in the discharge of a child, or children, to the family from out-of-home care. The names of Family Unification eligible families can be mutually shared between the HA and the PCWA. Families admitted to participate in the Family Unification Program must be selected in order based on their positions on the section 8 waiting list after the PCWA determines they are eligible for the Family Unification Program and the HA determines they are eligible for the section 8 program.

Any HA with a closed waiting list is required to advertise the opening of its waiting list before accepting new applicants for this demonstration program. The advertisement and opening of the waiting list may be limited to applications from Family Unification eligible families. For administrative convenience, an HA may limit the number of applications taken in response to an advertisement.



(3) Public Child Welfare Agency (PCWA) Responsibilities. Public child welfare agencies are responsible for:

(a) Providing written certification to the HA that a family qualifies as a Family Unification eligible family, under the eligibility requirements described in Section II(A)(1)(a) of this NOFA;

(b) Establishing and implementing a system to identify Family Unification eligible families within the agency's caseload and reviewing referrals from the HA;

(c) Committing sufficient staff resources to ensure that Family Unification eligible families are identified and the PCWA certification process based on the criteria in Section II(A) of this NOFA is completed in a timely manner; and

(d) Assuring the quality of the evaluation that HUD intends to conduct on the Family Unification Demonstration Program, and submitting a certification with the application that the PCWA will agree to cooperate with and provide requested data to the HUD office having responsibility for program evaluation.

(4) Federal Preference. To participate in the Family Unification Demonstration Program, a family must be a Family Unification eligible family as defined in Section II(A)(1) of this NOFA. Generally, most families eligible for the Family Unification Demonstration Program will qualify for a Federal preference. However, if an HA selects a family without a Federal preference for its Family Unification Demonstration Program, but has skipped over a family with a Federal Preference, the selected family will count against the HA's 10 percent authority to select non-Federal preference holders.

(5) Section 8 Rental Certificate Assistance. The Family Unification Demonstration Program provides assistance under the section 8 rental assistance programs. Although HUD is providing a special allocation of rental certificates, the HA may use both rental vouchers and certificates to assist families under this demonstration program. HAs must administer this demonstration program in accordance with HUD's regulations governing the section 8 rental certificate and rental voucher programs, codified at 24 CFR part 882 and 24 CFR part 887. The HA may issue a rental voucher to a family selected to participate in the Family Unification Program if the family requests a rental voucher and the HA has one available. If section 8 assistance for a family under this demonstration is terminated, the rental assistance must

be reissued to another Family Unification eligible family during the five-year term of the ACC for the section 8 rental certificates provided under this demonstration.

#### (B) Selection Criteria/Ranking Factors

To provide each applicant HA with a fair and equitable opportunity to receive an award of rental certificates for the Family Unification Demonstration Program during FY 1993, HUD will use the three objective selection criteria listed below to rate all applications found acceptable for further processing.

##### (1) Selection Criterion 1: HA Administrative Capability (30 points)—

(a) Description: Overall HA administrative ability in the Rental Voucher, Rental Certificate, and Moderate Rehabilitation Programs, as evidenced by factors such as leasing rates and correct administration of housing quality standards (HQS), portability of rental vouchers and rental certificates, compliance with Fair Housing and Equal Opportunity program requirements, assistance payment computation, and rent reasonableness requirements is either excellent or good. For purposes of this NOFA, an HA administering a Rental Voucher, Rental Certificate, or Moderate Rehabilitation Program will not be rated on the administration of its Public or Indian Housing Program. If an HA is not administering a Rental Voucher, Rental Certificate, or Moderate Rehabilitation Program, the Field Office/Indian Programs Office will rate HA administration of the Public or Indian Housing Program.

(b) Rating: 16-30 points. Field Office/Indian Programs Office rates overall HA administration of the Rental Voucher, Rental Certificate, and Moderate Rehabilitation Programs (or Public/Indian Housing) as excellent; there are no serious outstanding management review, fair housing and equal opportunity monitoring review, or Inspector General audit findings (unless Office of Inspector General recommendation has been appealed by Field Office, Indian Programs Office or Regional Office); the HA is complying with the portability requirements under the rental voucher and rental certificate programs; not more than 15 percent of the units inspected by the Field Office/Indian Programs Office during the last management review failed to meet housing quality standards (HQS) or the Field Office is aware of actions taken by the HA to improve its inspection procedures; and the leasing rate for rental vouchers and rental certificates (or occupancy rate for public/Indian housing units) under Annual

Contributions Contract (ACC) for one year or more was at least 95 percent as of September 30, 1992, unless Field Office/Indian Programs Office documents that September 30, 1992, report was not reflective of HA performance;

1-15 points. Field Office/Indian Programs Office rates overall HA administration of the Rental Voucher, Rental Certificate, and Moderate Rehabilitation Programs (or Public/Indian Housing) as good; any management review, fair housing and equal opportunity monitoring review, or Inspector General audit findings are being satisfactorily addressed; the Field Office is aware of some problems with HA administration of portability (e.g., not responding to billing promptly); not more than 25 percent of the units inspected by the Field Office/Indian Programs Office during the last management review failed to meet HQS or the Field Office is aware of actions taken by the HA to improve its inspection procedures; and the leasing rate for rental vouchers and rental certificates (or occupancy rate for Public/Indian Housing units) under ACC for one year or more was at least 85 percent as of September 30, 1992, unless the Field Office/Indian Programs Office documents that the September 30, 1992, report is not reflective of HA performance.

0 points. If neither of the above statements apply, assign 0 points.

(2) Selection Criterion 2: Coordination Between HA and Public Child Welfare Agency to Identify and Assist Eligible Families (30 points)—

(a) Description: The application describes the method that the HA and the public child welfare agency will use to identify and assist Family Unification eligible families.

(b) Rating: 16-30 points. A letter of intent from the PCWA indicating its commitment to provide resources and support for the program is included with the HA application. The PCWA letter of intent and other information provided is comprehensive and includes an explanation of the method used to identify eligible families, of the PCWA's certification process for determining eligible families based on the criteria in Section II(A) of this NOFA, of the responsibilities of each agency, of the PCWA assistance provided to families in locating housing units, of the PCWA staff resources committed to the program, of the past PCWA experience administering a similar program, and of the PCWA/HA cooperation in administering a similar program.

**1-15 points.** The information provided is general and includes a discussion of the method and process used to identify and assist eligible families.

**0 points.** The information provided is either not coherent or fails to include an explanation of the method and process used to identify and assist eligible families. Proposed administration of program is not consistent with program regulations.

**(3) Selection Criterion 3: Public Child Welfare Agency Statement of Need for Family Unification Demonstration Program (20 points)—**

**(a) Description:** The application must describe the need for a program providing assistance to families for whom lack of adequate housing is a primary factor in the placement of the family's children in out-of-home care, or in the delay of discharge of the children to the family from out-of-home care in the area to be served, as evidenced by the caseload of the public child welfare agency.

**(b) Rating: 11-20 points.** The PCWA has adequately demonstrated that there is a need in the HA's jurisdiction for the Family Unification Demonstration which is not being met through existing programs. The narrative includes specific information relevant to the area to be served, about homelessness, family violence resulting in involuntary displacement, number and characteristics of families who are experiencing the placement of children in out-of-home care or the delayed discharge of children from out-of-home care as the result of inadequate housing, and the PCWA's past experience in obtaining housing through HUD assisted programs and other sources for families lacking adequate housing.

**1-10 points.** The PCWA has provided a general narrative describing a need for the Family Unification demonstration in the HA's jurisdiction.

**0 points.** There is no need, or the PCWA has not adequately demonstrated the need for the number of certificates requested in the application.

#### **(C) Application Processing**

The HUD Field Office/Indian Programs Office and the Regional Office of Public Housing are responsible for rating the applications, and HUD Headquarters is responsible for ranking and selection of applications (including applications rated by the Indian Programs Office) which will receive assistance under the Family Unification Demonstration Program. The Field Office/Indian Programs Office will initially screen all applications, using the "Checklist for Technical

Requirements" listed in Section IV(B) of this NOFA as a guide to determine if an application is complete.

#### **(D) Selection Process**

After the Field Office or Indian Programs Office has screened HA applications and disapproved any applications unacceptable for further processing (see Section III of this NOFA), the Field Office or Indian Programs Office will review and rate all approvable applications, utilizing the selection criteria and point assignments listed in this NOFA. All scored applications and rating sheets in each Field Office and Indian Programs Office will be sent to the Regional Office. The Indian Programs Office will send each application to the Regional Office that has jurisdiction over the State in which the Indian Housing Authority is located.

In order to ensure that rating is consistent among the Field Offices within its region, the Regional Office of Public Housing will review and may re-rate these applications, utilizing the same selection criteria and point assignments listed in this NOFA.

The Regional Office of Public Housing must send to HUD Headquarters the Field Office and/or Indian Programs Office rating sheets, and the Regional Office rating sheets. Headquarters may review and re-rate these applications, utilizing the same selection criteria and point assignment listed in this NOFA. Headquarters will fund the highest rated applications until the rental certificate funds are insufficient to fund the next highest rated application(s). In the event of tie scores, HUD Headquarters will rank tied applications on the basis of selection criteria 2—coordination between HA and Public Child Welfare Agency to identify and assist eligible families.

When remaining rental certificate funds are insufficient to fund the next highest scoring application(s) in full, HUD Headquarters may fund that application(s) to the extent of the number of units available. Applicants that do not wish to have the size of their programs reduced may indicate in their applications that they do not wish to be considered for a reduced award of funds. HUD Headquarters will skip over these applicants if assigning the remaining funding would result in a reduced funding level.

#### **(E) Local Government Comments**

The Field Office will obtain "section 213" comments, in accordance with 24 CFR part 791, subpart C, from the unit of general local government. Comments submitted by the unit of general local

government must be considered before an application can be approved.

For purposes of expediting the application process, the HA should encourage the chief executive officer of the unit of general local government to submit a letter with the HA application commenting on the HA application in accordance with section 213. Since HUD cannot approve an application until the 30-day comment period is closed, the section 213 letter should not only comment on the application, but also state that HUD may consider the letter to be the final comments and that no additional comments will be forthcoming from the unit of general local government.

#### **III. Checklist of Application Submission Requirements**

##### **(A) Application Requirements**

**(1) Form HUD-52515.** An Application for Existing Housing, Form HUD-52515, must be completed in accordance with the rental certificate program regulations. A copy of Form HUD 52515 is attached to this notice (Attachment 1), and can be obtained from the local HUD Field Office/Indian Program Office.

All the items in this Section III must be included in the application submitted to the HUD Field Office/Indian Programs Office. The application must include an explanation of how the application meets, or will meet, Selection Criteria 2 and 3. The PCWA serving the jurisdiction of the HA is responsible for providing the information for Selection Criterion 3, "Need for Family Unification Demonstration Program," to the HA for submission with the HA application. A State-wide PCWA must provide information on Selection Criteria 3 to all HAs that request data, otherwise, HUD will not consider applications from any HAs with the PCWA as a participant in its program. The HA must state in its cover letter to the application whether it will accept a reduction in the number of units and the minimum number of units it will accept since the funding is limited and HUD may only have enough funds to approve a smaller amount than the number of units requested.

**(2) Certification Regarding Drug-Free Workplace.** The Drug-Free Workplace Act of 1988 requires grantees of Federal agencies to certify that they will provide a drug-free workplace. Thus, each HA must certify (even though it has done so previously) that it will comply with the drug-free workplace requirements in accordance with CFR part 24, subpart . [see Attachment 2].

**(3) Certification Regarding Lobbying.** Section 501(c)(19) of the Department of the

Interior Appropriations Act, Public Law 101-121, approved October 23, 1989 (31 U.S.C. 1352) (the "Byrd Amendment") generally prohibits recipients of Federal contracts, grants, and loans from using appropriated funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a specific contract, grant, or loan. The Department's regulations on these lobbying restrictions are codified at 24 CFR part 87. To comply with 24 CFR 87.110, any HA submitting an application under this announcement for more than \$100,000 of budget authority must submit a certification and, if applicable, a Disclosure of Lobbying Activities (SF-LLL).

To assist HAs, the text for the Certification Regarding Lobbying (Attachment 3) and "Disclosure Form to Report Lobbying" (SF-LLL) (Attachment 4) are attached to this

announcement. IHAs established by an Indian tribe as a result of the exercise of the tribe's sovereign power are excluded from coverage of the Byrd Amendment, but IHAs established under State law are not excluded from the statute's coverage.

(4) Form HUD-2880. A Form HUD-2880 (Applicant/Recipient Disclosure/Update Report) (Attachment 6) must be completed in accordance with subpart C of 24 CFR part 12, Accountability in the Provision of HUD Assistance. (See Section V(D) of this NOFA.)

(5) Evaluation Certifications. The HA and the PCWA in separate certifications must state that the HA and PCWA agree to cooperate with HUD and provide requested data to the HUD office designated responsibility for the program evaluation.

(6) Single Audit Act Certification. The HA must submit the Single Audit Act

Certification (Attachment 5) in accordance with the Single Audit Act, and HUD's regulations at 24 CFR part 44.

#### (B) Checklist for Technical Requirements

The checklist for technical requirements provided in this Section specifies the information that must be included in the application. HAs are encouraged to review the checklist to ensure that the application submitted is complete.

#### Checklist for Technical Requirements

The following checklist specifies the required information which must be submitted in the joint application. It is recommended, but not required, that the application contain a narrative explaining how the application meets the selection criteria.

#### INITIAL SCREENING CHECKLIST

HA		Field office		
Yes	No	Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. The application contains a cover letter stating the total number of rental vouchers or rental certificates requested in the application and indicates whether the applicant is willing to accept a reduced number and the minimum number of units the applicant is willing to accept.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. The application includes form HUD 52515 and the monthly adjusted income (see section H of HUD 52515) by bedroom size for which the HA has submitted an application.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. The application demonstrates that the applicant qualifies as an HA and is legally qualified and authorized to participate in the rental assistance programs for the area in which the program is to be carried out. Such demonstration includes (i) the relevant enabling legislation, (ii) any rules and regulations adopted or to be adopted by the agency to govern its operations, and (iii) a supporting opinion from the agency counsel. If such documents are currently on file in the Field Office, they do not have to be resubmitted.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. The application includes a statement that the housing quality standards to be used in the operation of the program will be as set forth in 24 CFR 882.109 or that variations in the Acceptability Criteria are proposed. In the latter case, each proposed variation shall be specified and justified.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. The application contains the HA schedule of leasing which must provide for the expeditious leasing of units. In developing the schedule, an HA must specify the number of units that are expected to be leased at the end of each three-month interval. The schedule must project lease-up by eligible families within twelve months or sooner after execution of the ACC by HUD.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. The application contains a narrative explaining how the application meets Selection Criterion 2, Coordination Between HA and Public Child Welfare Agency to Identify and Assist Eligible Families.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. The application contains the Public Child Welfare Agency Statement of Need for Family Unification Demonstration Program, Selection Criterion 3.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. The application contains an evaluation certification from the HA and from the PCWA.

#### REQUIREMENT FOR DRUG-FREE WORKPLACE CERTIFICATION, ANTI-LOBBYING CERTIFICATION AND DISCLOSURE STATEMENT, AND COMPLIANCE WITH THE SINGLE AUDIT ACT

HA		Field office		
Yes	No	Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The application meets HUD's drug-free workplace requirement set out at 24 CFR part 24, subpart F. (The application contains an executed Certification for a Drug-Free Workplace (Attachment 2).)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The application meets HUD's regulations regarding anti-lobbying set out at 24 CFR part 87. The anti-lobbying requirements apply to applications that, if approved, would result in the HA obtaining more than \$100,000 in budget authority. To comply, HAs must submit an Anti-Lobbying Certification (Attachment 3) and if warranted, a Disclosure of Lobbying Activities (Attachment 4).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The application meets the requirement that the applicant is in compliance with the Single Audit Act, OMB Circular No. A-128 and HUD's implementing regulations at 24 CFR 44; or OMB Circular No. A-133. To comply, HAs must submit a Single Audit Act Certification (Attachment 5). HAs who are not currently in compliance with the audit requirements will not be eligible for funding.



#### IV. Corrections to Deficient Applications.

##### (1) Acceptable Applications

To be eligible for processing, an application must be received by the Field Office/Indian Programs Office no later than the application submission deadline date and time specified in this NOFA. The Field Office/Indian Programs Office will screen all applications and notify HAs of technical deficiencies by letter. Allowable corrections relate only to technical items, as determined by HUD, which do not improve the substantive quality of the application relative to the ranking factors.

All HAs must submit corrections within 14 calendar days from the date of HUD's letter notifying the applicant of any technical deficiency. Information received after 3 p.m. local time on the fourteenth calendar day of the correction period will not be accepted and the application will be rejected as being incomplete.

All HAs are encouraged to review the "Checklist for Technical Requirements" provided in Section III of this NOFA. The checklist identifies all technical requirements needed for application processing. An HA application that does not comply with the requirements of 24 CFR 882.204(a) and this notice, including the drug-free workplace certification and the antilobbying certification disclosure requirements, after the 14-day technical deficiency correction period, will be rejected.

##### (2) Unacceptable Applications

(a) After the 14-calendar day technical deficiency correction period (refer to Section III(C)(1) of this NOFA, Corrections to Deficient Applications, of this NOFA), if any, the Field Office/Indian Programs Office will disapprove HA applications that it determines are not acceptable for processing (refer to Section IV, Checklist of Technical Requirements, of this NOFA). The Field Office/Indian Programs Office notification of rejection letter must state the basis for the decision.

(b) Applications that fall into any of the following categories will not be processed:

- (i) The Department of Justice has brought a civil rights suit against the applicant HA and the suit is pending;
- (ii) There are outstanding findings of noncompliance with civil rights statutes, Executive Orders, or regulations as a result of formal administrative proceedings, or the Secretary has issued a charge against the applicant under the Fair Housing Act, unless the applicant is operating under

a conciliation or compliance agreement designed to correct the areas of noncompliance;

(iii) HUD has deferred application processing under Title VI of the Civil Rights Act of 1964, the Attorney General's Guidelines (28 CFR 50.3) and the HUD Title VI regulations (see 24 CFR 1.8), or under section 504 of the Rehabilitation Act of 1973 and the HUD section 504 regulations (see 24 CFR 8.57).

(iv) The HA has serious, unaddressed, outstanding Inspector General audit findings or fair housing and equal opportunity monitoring review findings or Field Office management review findings for one or more of its rental certificate, rental voucher, or moderate rehabilitation programs, or, in the case of an HA that is not currently administering a Rental Voucher, Rental Certificate, or Moderate Rehabilitation Program, for its Public Housing Program or Indian Housing Program.

(v) The leasing rate for rental certificates and rental vouchers under ACC for at least one year is less than 75 percent.

(vi) The HA is involved in litigation and HUD determines that the litigation may seriously impede the ability of the HA to administer an additional increment of rental vouchers or rental certificates.

(vi) The HA is not in compliance with the Single Audit Act (31 U.S.C. 7501-7507), OMB Circular No. A-128 and HUD's implementing regulations at 24 CFR part 44, or OMB Circular No. A-133, as applicable.

#### V. Other Matters

##### (A) Environmental Impact

A Finding of No Significant Impact with respect to the environment has been made in accordance with the Department's regulations at 24 CFR part 50, which implement section 102(2)(C) of the National Environmental Policy Act of 1969 (42 U.S.C. 4332). The Finding is available for public inspection between 7:30 a.m. and 5:30 p.m. weekdays in the Office of the Rules Docket Clerk, Office of General Counsel, Department of Housing and Urban Development, room 10276, 451 Seventh Street, SW., Washington, DC 20410.

##### (B) Federalism Impact

The General Counsel, as the Designated Official under section 6(a) of Executive Order 12612, Federalism, has determined that this NOFA does not have substantial, direct effect on the States, on their political subdivisions, or on the relationship between the Federal government and the States, or on the

distribution of power or responsibilities among the various levels of government, because this NOFA does not alter the established roles of HUD, the States and local governments, including HAs.

##### (C) Impact on the Family

The General Counsel, as the Designated Official under Executive Order 12606, The Family, has determined that the policies contained in these guidelines may have a significant impact on the maintenance and general well-being of some families. The Family Unification demonstration can be expected to provide additional decent and sanitary housing for very low-income families with children who seek to maintain the family unit. Since the impact on the family is considered beneficial, no further review under the order is necessary.

##### (D) Accountability in the Provision of HUD Assistance

HUD has promulgated a final rule to implement section 102 of the Department of Housing and Urban Development Reform Act of 1989 (HUD Reform Act). The final rule is codified at 24 CFR part 12, Section 102 contains a number of provisions that are designed to ensure greater accountability and integrity in the provision of certain types of assistance administered by HUD. On January 16, 1992, HUD published at 57 FR 1942, additional information that gave the public (including applicants for, and recipients of, HUD assistance) further information on the implementation of section 102. The documentation, public access, and disclosure requirements of section 102 are applicable to assistance awarded under this NOFA as follows:

(1) *Documentation and Public Access.* HUD will ensure that documentation and other information regarding each application submitted pursuant to this NOFA are sufficient to indicate the basis upon which assistance was provided or denied. This material, including any letters of support, will be made available for public inspection for a five-year period beginning not less than 30 days after the award of the assistance. Material will be made available in accordance with the Freedom of Information Act (5 U.S.C. 552) and HUD's implementing regulations at 24 CFR part 15. In addition, HUD will include the recipients of assistance pursuant to this NOFA in its quarterly Federal Register notice of all recipients of HUD assistance awarded on a competitive basis. (See 24 CFR 12.14(a) and 12.16(b), and the notice published in the Federal Register on January 16,

1992 (57 FR 1942), for further information on these requirements.)

(2) *Disclosures.* HUD will make available to the public for five years all applicant disclosure reports (HUD Form 2880) submitted in connection with this NOFA. Update reports (also Form 2880) will be made available along with the applicant disclosure reports, but in no case for a period less than three years. All reports—both applicant disclosures and updates—will be made available in accordance with the Freedom of Information Act (5 U.S.C. 552) and HUD's implementing regulations at 24 CFR part 15. (See 24 CFR part 12, subpart C, and the notice published in the Federal Register on January 16, 1992 (57 FR 1942), for further information on these disclosure requirements.)

*(E) Prohibition Against Lobbying Activities*

The use of funds awarded under this NOFA is subject to the disclosure requirements and prohibitions of section 319 of the Department of Interior and Related Agencies Appropriations Act for Fiscal Year 1990 (31 U.S.C. 1352) (the "Byrd Amendment") and the implementing regulations at 24 CFR part 87. These authorities prohibit recipients of Federal contracts, grants, or loans from using appropriated funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a specific contract, grant, or loan. The prohibition also covers the awarding of contracts, grants, cooperative agreements, or loans unless the recipient has made an acceptable certification regarding lobbying. Under 24 CFR part 87, applicants, recipients, and subrecipients of assistance

exceeding \$100,000 must certify that no Federal funds have been or will be spent on lobbying activities in connection with the assistance.

Indian Housing Authorities (IHAs) established by an Indian tribe as a result of the exercise of the tribe's sovereign power are excluded from coverage of the Byrd Amendment, but IHAs established under State law are not excluded from the statute's coverage.

*(F) Prohibition Against Lobbying of HUD Personnel*

Section 13 of the Department of Housing and Urban Development Act (42 U.S.C. 3537b) contains two provisions dealing with efforts to influence HUD's decisions with respect to financial assistance. The first imposes disclosure requirements on those who are typically involved in these efforts—those who pay others to influence the award of assistance or the taking of a management action by the Department and those who are paid to provide the influence. The second restricts the payment of fees to those who are paid to influence the award of HUD assistance, if the fees are tied to the number of housing units received or are based on the amount of assistance received, or if they are contingent upon the receipt of assistance.

HUD's regulation implementing section 13 is codified at 24 CFR part 88. If readers are involved in any efforts to influence the Department in these ways, they are urged to read the final rule, particularly the examples contained in Appendix A of the rule. Appendix A of this rule contains examples of activities covered by this rule.

Any questions concerning the rule should be directed to the Office of

Ethics, room 2158, Department of Housing and Urban Development, 451 Seventh Street, SW., Washington, DC 20410. Telephone: (202) 708-3815 (voice/TDD). This not a toll-free number. Forms necessary for compliance with the rule may be obtained from the local HUD office.

*(G) Prohibition Against Advance Information on Funding Decisions*

Section 103 of the HUD Reform Act proscribes the communication of certain information by HUD employees to persons not authorized to receive that information during the selection process for the award of assistance. HUD's regulation implementing section 103 is codified at 24 CFR part 4, and was amended by an interim rule published in the Federal Register on August 4, 1992 (57 FR 34246). In accordance with the requirements of section 103, HUD employees involved in the review of applications and in the making of funding decisions are restrained by 24 CFR part 4 from providing advance information to any person (other than an authorized employee of HUD) concerning funding decisions, or from otherwise giving any applicant an unfair competitive advantage. Persons who apply for assistance in this competition should confine their inquiries to the subject areas permitted by 24 CFR part 4. Applicants who have questions should contact the HUD Office of Ethics (202) 708-3815 (voice/TDD). (This is not a toll-free number.)

Dated: June 22, 1993.

Joseph Shuldiner,  
Assistant Secretary for Public and Indian Housing.

BILLING CODE 4210-32-M

## **FEDERAL PROGRAMS**

### **Empowerment Zones and Enterprise Communities**

The Omnibus Budget Reconciliation Act of 1993 made \$1 billion available under Title XX for grants to States for qualified empowerment zones and qualified enterprise communities. To obtain grant funds, a qualified zone or community must submit a plan that includes a detailed description of the activities proposed for the area. The plan must be developed in cooperation with the local governments with jurisdiction over the zone or community.

Grant funds must be used for social services directed at three goals: (1) achieving or maintaining economic self-support to prevent, reduce or eliminate dependency; (2) achieving or maintaining self-sufficiency, including reduction or prevention of dependency; or (3) preventing or remedying neglect, abuse, or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitating or reuniting families.

Regulations governing the development and submittal of plans will be published in the Federal Register.

For further information, contact one of the following offices:

Department of Health and Human Services  
Administration for Children and Families  
Office of Community Services  
370 L'Enfant Promenade, S.W.  
Washington, D.C. 20447  
(202) 401-9333  
(202) 401-4683 (FAX)

Department of Housing and Urban Development  
Enterprise Zone Development  
451 7th Street, S.W.  
Washington, D.C. 20410  
(202) 708-2035  
(202) 708-3363 (FAX)

U.S. Department of Agriculture  
Strategy Development Staff  
Rural Development Administration  
14th Street and Independence Avenue, S.W.  
Room 5405  
Washington, D.C. 20250-3200  
(202) 690-1045

Information from the Department of Agriculture may also be accessed through an InterNet mail message at: [Info@ezec.usda.gov](mailto:Info@ezec.usda.gov)

## **PART VI. BIBLIOGRAPHY (Partial)**

*The following bibliography represents some of the articles and books written on family support and family preservation. The bibliography also includes a couple sources relating to needs assessments and program evaluation. The list is not inclusive. Please feel free to submit information about additional resources to the Administration on Children, Youth, and Families, 330 C Street, SW, Room 2026, Washington, DC 20201.*

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## **ATTACHMENT D**

**Family Preservation and Family Support Services  
State Application Preprint for Fiscal Year 1994 Funds**

## PART A: PLANNING

Legal Citations	Eligible Grantee
Section 431 (a)(3)	<p>A.1. Name of State Agency:</p> <hr/> <p>The State child welfare agency responsible for title IV-B, subpart 1, shall administer or supervise the administration of, subpart 2, family preservation and family support services.</p>

Legal Citations	Funds for Planning
Section 434 (a)(2)	<p>2. Indicate the estimated amount of funds the State will use for planning, including the development of the five-year State Plan.</p> <p align="center">\$ _____</p>
Section 432; and Section 434 (a)(2)	<p>3. (a) Describe the proposed planning activities envisioned by the State for development of the State Plan, including active involvement of community-based organizations, parents, consumers, Indian Tribes, community representatives and others.</p>

	(b) Describe how the State will coordinate the provision of services with representatives of Federal and federally assisted programs to develop a more comprehensive and integrated service delivery system.
Section 434 (a)(2)	(c) List planned contacts and describe outreach activities to ensure that interested parties in the State have an opportunity for active involvement in the planning process.
Section 432 (a)(2)(C)(ii)	(d) Describe how the State will inform appropriate parties about this new legislation and the planning, consultation, and coordination provisions.
Section 434 (a)(2)	4. Describe how the State will assess State and local needs or describe a recently conducted prior planning process which assessed community needs.
Section 434 (a)(2)	5. Describe how information on the nature and scope of existing family preservation and family support programs in the State will be collected.
Section 434 (a)(2)	6. Describe other proposed activities for the development of a five-year State Plan and implementation of service system reform, including training and technical assistance and assessment of services.
Section 432 (a)(7); and Section 434 (a)(2)	7. Supply State FY 1992 fiscal data on Federally or State funded family support and family preservation services by completing the form on page 9 of this preprint.



	<p><u>Assurances</u></p> <p>8. Provide the following general assurances:</p>
Section 432 (a)(6)	<p>○ Assure that the State will perform administrative procedures the Secretary determines to be necessary for the proper and efficient operation of the State Plan.</p>
Section 432 (a)(7)(A)	<p>○ Assure that the State will not use funds provided under this subpart to supplant Federal or non-Federal funds for existing family preservation and family support services and activities.</p>
Section 432 (a)(7)(B)	<p>○ Assure that future reports on compliance with the supplantation prohibition will be provided at the request of the Secretary.</p>
Section 432 (a)(8)	<p>○ Assure that the State will furnish reports as required by the Secretary, including the SF-269.</p>
Section 432 (a)(8)	<p>○ Assure that the State will participate in evaluations as the Secretary may require.</p>
Section 434 (b)(2)	<p>○ Assure that the State will expend (obligate and liquidate) any FY 1994 Federal funds before the end of the immediately succeeding fiscal year.</p>

	<u>Certifications</u>  9. Submit the following certifications, found at attachment A of this preprint:
45 CFR 93, Appendix A	<input type="radio"/> Anti-Lobbying and Disclosure form;
45 CFR 76.600	<input type="radio"/> Drug-Free Workplace; and
45 CFR 76.500	<input type="radio"/> Debarment.

Application Approval for Planning
10.  <input type="radio"/> _____ Signature of State Agency Official/Title/Date  The signature above certifies that the State agency will comply with the requirements of title IV-B, subpart 2, of the Social Security Act, including all the required assurances and certifications for planning.  <input type="radio"/> _____ Name of State Child Welfare Official, including title and telephone number to whom requests for clarification and/or additional information related to planning may be directed.  <input type="radio"/> _____ Signature of Regional Office Approving Official/Title/Date

**PART B: SERVICES**

Legal Citations	Funds for Services																								
<b>Section 434 (a)(2)(B)</b>	<p><b>B.1. Specify the estimated amount of funds the State will use for services, training and technical assistance and administrative costs in FY 1994, indicating both the Federal and State share.</b></p> <table border="0"> <thead> <tr> <th></th> <th style="text-align: center;"><u>State</u></th> <th style="text-align: center;"><u>Federal</u></th> </tr> </thead> <tbody> <tr> <td>Family preservation services</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">\$ _____</td> </tr> <tr> <td>Community-based Family support services</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">\$ _____</td> </tr> <tr> <td>Total amount for services</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">Total State and Federal</td> <td style="text-align: center;">\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">Total amount for training *</td> <td style="text-align: center;">\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">Total amount for technical assistance *</td> <td style="text-align: center;">\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">Total amount for administrative costs</td> <td style="text-align: center;">\$ _____</td> </tr> </tbody> </table>		<u>State</u>	<u>Federal</u>	Family preservation services	\$ _____	\$ _____	Community-based Family support services	\$ _____	\$ _____	Total amount for services	\$ _____	\$ _____	Total State and Federal		\$ _____	Total amount for training *		\$ _____	Total amount for technical assistance *		\$ _____	Total amount for administrative costs		\$ _____
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<b>Section 434 (a)(2)</b>	<p><b>2. Provide the findings of any needs assessment or prior planning process which led to the decision to spend FY 1994 funds for services. Include the method by which the assessment was conducted and a list of participants.</b></p>																								
<b>Section 434 (a)(2)</b>	<p><b>3. Describe how the public, including Indian Tribes, cities, communities and representatives of groups having expertise in family preservation and family support, parents and consumers and others participated in the development of the application to provide services in FY 1994.</b></p>																								

\* Estimate training and technical assistance expenditures under both planning and services.

Section 434 (a)(2)	4. (a) Identify the goals for services in FY 1994 and indicate how the funds obtained under this program will assist in meeting these goals. Specifically, describe how funds obtained under this program will be used to develop or expand family support and family preservation services and strengthen service delivery in the existing child welfare system.
Section 434 (a)(2)	(b) Describe how funds obtained under this program will link to other services to improve the likelihood that children and families will receive care appropriate to meet their multiple needs.
Section 434 (a)(2)	5. (a) Describe the community-based family support services and family preservation services that will be provided; include a description of the populations each of the programs will serve and the geographic areas in which each of the services will be provided.
Section 434 (a)(2)	(b) Describe the nature and scope of existing public and privately funded family preservation and family support services in the State.
Section 432 (a)(4); and Section 434 (a)(2)	<p>6. Indicate the specific percentage of program funds that the State will expend for family support and for family preservation services, respectively, and the rationale for that choice. Provide an explanation of how the distribution was reached and why it meets the requirement that a "significant portion" of the service funds must be spent for each service.</p> <p style="text-align: center;">Total of Planned Federal and State Expenditures</p> <p>Family Preservation _____ %</p> <p>Family Support _____ %</p>

Section 434 (a)(2)	<p>7. Specify the amount of family support funds which the State will provide to community-based organizations and the method by which organizations will be selected.</p> <p style="text-align: center;">\$ _____</p>
Section 432 (a)(4); and Section 434 (a)(2)	8. (a) Describe the types of activities that will be claimed as administrative costs.
Section 434 (a)(2)	(b) Describe the types of training and technical assistance activities that will be carried out.

	<p><u>Additional Assurances</u></p> <p>9. Provide the following assurances that relate to services:</p>
Section 434 (a)(2)(B)	<p>○ Assure that States will use no more than ten percent of expenditures for administrative costs.</p>
Section 434 (a)(2)(B)	<p>○ Assure that a significant portion of funds is used for both family preservation and community-based family support services.</p>
Section 434 (b)(1)	<p>○ Assure that Federal funds will not be used to meet the State's share of the costs of services not covered by the amount received under this law.</p>

Application Approval for Services

10.

○

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Signature of State Agency Official/Title/Date

The signature above certifies that the State agency will comply with the requirements of title IV-B, subpart 2, of the Social Security Act, including the required assurances and certifications for services.

○

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Name of State Child Welfare Official, including title and telephone number to whom requests for clarification and/or additional information related to services may be directed.

○

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Signature of Regional Office Approving Official/Title/Date



**ESTIMATED EXPENDITURES**  
**State Fiscal Year 1992**  
**FAMILY PRESERVATION AND FAMILY SUPPORT SERVICES**  
 Fiscal Data (in thousands) to meet the Supplantation Prohibition

Funding Source	Family Preservation Services		Family Support Services	
	STATE	FEDERAL	STATE	FEDERAL
Title IV-B	\$	\$	\$	\$
Title IV-A Emergency Assistance				
Title XX				
Other (please list)*				

\* Some examples of Federal and State funding sources are as follows:

Community Service Block Grant; Child Abuse and Neglect Grants; Children's Justice Act Grants; Community Prevention Grants (challenge grants); Family Resource and Support Programs (There are only three States which have these programs--CT, MD and VA); Parents as Teachers; Home Instruction Program for Preschool Youngsters (HIPPY); and Families First.

Certification Regarding Lobbying

Certification for Contracts, Grants, Loans,  
and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

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Organization

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Authorized Signature      Title      Date

## INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Use the SF-LLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee", then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influence the covered Federal action.  
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
12. Check the appropriate box(es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
13. Check the appropriate box(es). Check all boxes that apply. If other, specify nature.
14. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered. Include all preparatory and related activity, not just time spent in actual contact with Federal officials. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
15. Check whether or not a SF-LLL-A Continuation Sheet(s) is attached.
16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, D.C. 20503

# DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352  
(See reverse for public burden disclosure.)

Approved by C  
0348-0046

<b>1. Type of Federal Action:</b> <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
<b>4. Name and Address of Reporting Entity:</b> <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known:  Congressional District, if known: _____	<b>5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime:</b>  Congressional District, if known: _____	
<b>6. Federal Department/Agency:</b>	<b>7. Federal Program Name/Description:</b>  CFDA Number, if applicable: _____	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b> \$ _____	
<b>10. a. Name and Address of Lobbying Entity</b> (if individual, last name, first name, MI):	<b>b. Individuals Performing Services (including address if different from No. 10a)</b> (last name, first name, MI):	
(attach Continuation Sheet(s) SF-LLL-A, if necessary)		
<b>11. Amount of Payment (check all that apply):</b> \$ _____ <input type="checkbox"/> actual <input type="checkbox"/> planned	<b>13. Type of Payment (check all that apply):</b> <input type="checkbox"/> a. retainer <input type="checkbox"/> b. one-time fee <input type="checkbox"/> c. commission <input type="checkbox"/> d. contingent fee <input type="checkbox"/> e. deferred <input type="checkbox"/> f. other; specify: _____	
<b>12. Form of Payment (check all that apply):</b> <input type="checkbox"/> a. cash <input type="checkbox"/> b. in-kind; specify: nature _____ value _____		
<b>14. Brief Description of Services Performed or to be Performed and Date(s) of Service, including officer(s), employee(s), or Member(s) contacted, for Payment Indicated in Item 11:</b>   (attach Continuation Sheet(s) SF-LLL-A, if necessary)		
<b>15. Continuation Sheet(s) SF-LLL-A attached:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>16. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.</b>	<b>Signature:</b> _____ <b>Print Name:</b> _____ <b>Title:</b> _____ <b>Telephone No.:</b> _____ <b>Date:</b> _____	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form - LLL

# DISCLOSURE OF LOBBYING ACTIVITIES CONTINUATION SHEET

Approved by OM.  
0348-0046

Reporting Entity: \_\_\_\_\_ Page \_\_\_\_\_ of \_\_\_\_\_

**U.S. Department of Health and Human Services**  
**Certification Regarding Drug-Free Workplace Requirements**  
**Grantees Other Than Individuals**

By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.

This certification is required by regulations implementing the Drug-Free Workplace Act of 1988, 45 CFR Part 76, Subpart F. The regulations, published in the May 25, 1990 Federal Register, require certification by grantees that they will maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when the Department of Health and Human Services (HHS) determines to award the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, HHS, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or governmentwide suspension or debarment.

Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.

Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios.)

If the workplace identified to HHS changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see above).

Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:

"Controlled substance" means a controlled substance in Schedules I through V of the Controlled Substances Act (21 USC 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15).

"Conviction" means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes;

"Criminal drug statute" means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

"Employee" means the employee of a grantee directly engaged in the performance of work under a grant, including: (i) All "direct charge" employees; (ii) all "indirect charge" employees unless their impact or involvement is insignificant to the performance of the grant; and, (iii) temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subrecipients or subcontractors in covered workplaces).

The grantee certifies that it will or will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an ongoing drug-free awareness program to inform employees about:

(1) The dangers of drug abuse in the workplace; (2) The grantee's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and, (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:

(1) Abide by the terms of the statement; and, (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(e) Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

*(Continued on reverse side of this sheet)*



**RHS—Certification Regarding Drug-Free Workplace Requirements—continued from reverse page**

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or, (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant (use attachments, if needed):

Place of Performance (Street address, City, County, State, ZIP Code) \_\_\_\_\_

Check ☐ if there are workplaces on file that are not identified here.

Certification Regarding Debarment, Suspension, and Other  
Responsibility Matters - Primary Covered Transactions

By signing and submitting this proposal, the applicant, defined as the primary participant in accordance with 45 CFR Part 76, certifies to the best of its knowledge and belief that it and its principals:

(a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal Department or agency;

(b) have not within a 3-year period preceding this proposal been convicted of or had a civil judgment rendered against them for obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.

(c) are not presently indicated or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) have not within a 3-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

The inability of a person to provide the certification required above will not necessarily result in denial of participation in this covered transaction. If necessary, the prospective participant shall submit an explanation of why it cannot provide the certification. The certification or explanation will be considered in connection with the Department of Health and Human Services' (HHS) determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.

The prospective primary participant agrees that by submitting this proposal, it will include the clause entitled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transactions" provided below without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

Certification Regarding Debarment, Suspension, Ineligibility and  
Voluntary Exclusion - Lower Tier Covered Transactions  
(To Be Supplied to Lower Tier Participants)

By signing and submitting this lower tier proposal, the prospective lower tier participant, as defined in 45 CFR Part 76, certifies to the best of its knowledge and belief that it and its principals:

(a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.

(b) where the prospective lower tier participant is unable to certify to any of the above, such prospective participant shall attach an explanation to this proposal.

The prospective lower tier participant further agrees by submitting this proposal that it will include this clause entitled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transactions" without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

## **ATTACHMENT E**



FY 1995 Five-Year State Plan - Issues for Future Regulations

We plan to publish a notice of proposed rulemaking in the spring of 1994. In our discussions with focus group participants and others, we have received a number of policy recommendations which are under consideration for inclusion in the proposed rule. The following is a list of preliminary regulatory issues under consideration for the FY 1995 State Plan:

- The State Plan should include a State vision or philosophy statement for services to children and families.
- The plan should include clearly stated goals and outcomes based on documented data on families and children; should reflect analysis of existing child welfare and related social welfare delivery systems; and should specify the steps that will be taken to measure outcomes and accomplish the goals.
- The plan should document current, proposed, and ongoing coordination and collaboration with specified programs, agencies, organizations, and individuals at the State and community levels.
- The plan should articulate a continuum of coordinated services in the State from prevention (family support services) to child abuse and neglect investigation, family preservation services, foster care and adoption services, reunification services and other supportive activities. The State should show how multiple State and local agencies and services programs, both public and private, are a part of this continuum, e.g., mental health, the courts, education, community action agencies, foundations, non-profit community-based organizations, housing, income security. The State should show how the continuum reflects the multiple sources of funding that contribute to this service system and how services are family-centered, flexible, easily accessible, and provide an improved service delivery system to children and families.
- The plan should identify specific existing and planned family preservation services and family support services and describe how they fit into the continuum of services.
- The plan should include a complete and detailed description of the family preservation services and the family support services in the State, the target populations for each service, and the geographic areas in which each service will be provided in the upcoming year. This information must also be made available to the public (Section 432(a)(5) of

the Social Security Act).

- The plan should describe the realistic and measurable results and benefits that are expected to be derived from the family support and family preservation services programs and the manner in which actual results and benefits would be measured and substantiated to determine if stated objectives and goals are met. This should include a description of the methods to be used to evaluate annual progress and to evaluate the effectiveness of the family support and family preservation programs, such as:
  - a. types of data collection activities that will document the frequency; intensity, and duration and results of service delivery to children and families, including data that will come from management information systems;
  - b. evaluations of ongoing programs;
  - c. process evaluations focusing on implementation strategies at the State and local level; and
  - d. impact evaluations assessing the impact of new service delivery efforts.
- The plan should specify the quality standards used in the development, expansion, or operation of family preservation and family support services.
- The plan should document contracts or subgrants with community-based organizations for family support services.

Additional requirements under consideration for proposed regulations include:

- Specification of the public notification process States must use to publicize their Annual Report information on services, target populations, and geographic areas.
- A definition of the term "administrative cost" to clarify for States the ten percent limitation on administrative costs.
- A definition of the term "significant portion" to clarify for States what percentage of funds must be spent for family preservation and for family support services, respectively.
- A requirement for annual documentation of funds spent for family preservation and family support services to permit monitoring of the supplantation prohibition.



## **ATTACHMENT F**

**ADMINISTRATION FOR CHILDREN AND FAMILIES - REGIONAL OFFICES****REGIONAL ADMINISTRATORS****REGION I, BOSTON**

Hugh Galligan	Commercial:	(8) 617-565-1020
JFK Federal Building	FTS:	(8) 617-565-1020
Room 2000	Telefax:	(8) 617-565-2493
Boston, MA 02203	Verify:	(8) 617-565-1020

**REGION II, NEW YORK**

Ann Schreiber	Commercial:	(8) 212-264-2890
26 Federal Plaza	FTS:	(8) 212-264-2890
Room 4049	Telefax:	(8) 212-264-4881
New York, NY 10278	Verify:	(8) 212-264-2892

**REGION III, PHILADELPHIA**

Ralph E. Douglas	Commercial:	(8) 215-596-0352
Gateway Building	FTS:	(8) 215-596-0352
Room 5450	Telefax:	(8) 215-596-5028
3535 Market Street	Verify:	(8) 215-596-0352
Philadelphia, PA 19104		

**REGION IV, ATLANTA**

Patricia S. Brooks	Commercial:	(8) 404-331-5733
101 Marietta Tower	FTS:	(8) 404-331-5733
Suite 821	Telefax:	(8) 404-331-1776
Atlanta, GA 30323	Verify:	(8) 404-331-0781

**REGION V, CHICAGO**

Marion Steffy	Commercial:	(8) 312-353-4237
105 West Adams Street	FTS:	(8) 312-353-4237
20th Floor	Telefax:	(8) 312-353-2629
Chicago, IL 60603	Veriify:	(8) 312-353-4237

**REGION VI, DALLAS**

Leon R. McCowan	Commercial:	(8) 214-767-9648
1200 Main Tower	FTS:	(8) 214-767-9648
Suite 1700	Telefax:	(8) 214-767-3743
Dallas, TX 75202	Verify:	(8) 214-767-9648

REGION VII, KANSAS CITY

Linda Carson	Commercial:	(8) 816-426-3981
Federal Office Building	FTS:	(8) 816-426-3981
Room 384	Telefax:	(8) 816-426-2888
601 E. 12th Street	Verify:	(8) 816-426-3981
Kansas City, MO 64106		

REGION VIII, DENVER, COLORADO

Frank Fajardo	Commercial:	(8) 303-844-2622
Federal Office Bldg.	FTS:	(8) 303-844-2622
1961 Stout Street	Telefax:	(8) 303-844-3642
Room 924	Verify:	(8) 303-844-2622
Denver, CO 80294-3538		

REGION IX, SAN FRANCISCO

Sharon M. Fujii	Commercial:	(8) 415-556-7800
50 United Nations Plaza	FTS:	(8) 415-556-7800
Room 450	Telefax:	(8) 415-556-3046
San Francisco, CA 94102	Verify:	(8) 415-556-7800

REGION X, SEATTLE, WASHINGTON

Stephen S. Henigson	Commercial:	(8) 206-615-2547
2201 Sixth Avenue	FTS:	(8) 206-553-2775
Room 610-M/S RX-70	Telefax:	(8) 206-615-2574
Seattle, Washington 98121	Verify:	(8) 206-553-2775